Connecticut Department of Public Health Drinking Water Section	1
Water Quality Monitoring and Compliance Schedule	

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0180342	BROOKFIELD OFFICE PARK ASSOCIATION				NTNC	35	Р	GW
Local Address (v	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural	
304 FEDERAL RO	DAD	Connections	1					

304 FEDERAL ROAD	1		
Towns Served: BROOKFIELD			
Monitorir	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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Schedule Generation Date: 4/11/2019

	Connecticut Dep	artment o	of Public H	ealth	Dr	inkin	g W	ater S	Section		
	Water Qua	ality Moni	toring and	d Con	ıpli	ance	Sch	edule			
PWS ID	PWS Name				Class	sification	Popu	lation C	wner Type	Primary Source	
CT0180342	BROOKFIELD OFFICE PARK	ASSOCIATION			١	NTNC	3	35	Р	GW	
Local Address (v	where applicable)		Service	Residen	tial (	Commer	cial I	ndustrial	Combine	d Agricultural	
304 FEDERAL RO	OAD		Connections	1							
Towns Served:	BROOKFIELD										
			toring Requ	ireme	nts						
-	Facility: ENTRY POINT (										
	erbicides and PCBs - Phase	e II & V (SOCS)	•				<i>- 11</i>			r three years	
Sampling I	Point (Sampling Point ID)			Monitori			Collect	ion Perio	od Comp	liance Status	
0				1/1/20 -	12/31	1/22			/DT	<b>.</b>	
Organic Chen				Monitori	ina D-	riod	Callact		<del>-</del>	) per quarter	
ENTRY POI	Point (Sampling Point ID)			<b>Monitori</b>			Conect	ion Perio		Complete	
ENTRY POI	INI (3)			10/1/18 - 1/1/19 -						Complete Complete	
				4/1/19						complete	
				7/1/19 -		*					
Water System	Facility: WELL (WSF ID:	10064)		7/1/13	3,30	713					
E. Coli (3014)	,							1 r	outine (RT	) per quarter	
•	Point (Sampling Point ID)			Monitori	ina Pe	riod	Collect	ion Perio	<del>-</del>	liance Status	
WELL (2)				10/1/18 -						Complete	
, ,				1/1/19 -					Complete		
				4/1/19 -						·	
				7/1/19 -	9/30	/19					
		Other (	Compliance	Sched	lules	S					
Compliance Sch	nedule Activity				Due D	ate		Achieve	ed Date		
CROSS CONNEC	TION SURVEY REPORT				3/1/2	020					
		Public No	tification R	equire	eme	nts					
			Compliance	Notice		<u>Public</u>	Notific	ation_	PN Ce	rtification	
Violation/Situa	tion		Period	Tier	- 1	Required	l Pe	rformed	Due to DP	H Received	
Chloride MCL V	iolation	10/	1/18 - 12/31/18	2	3	/23/201	9 3/	1/2019	4/2/2019	3/1/2019	
Chloride MCL V	iolation	1/	1/19 - 3/31/19	2	5	5/9/2019	9		5/19/2019	9	
	Water 9	System Faci	lity and Sar	npling	Poi	nt Inv	ento	ry			
Water							Total	Lead a	nd		
*	er System Facility		t Sampling Poi	nt		Co	oliform			Stage	
Facility ID	DIDLETION CHEET	ID .	Description			tatus	Rule	Rule Ti	ier Asbesto	s WQP 2 DBPR	
00600 DIST	RIBUTION SYSTEM	4	GENERIC DIST			A	Y	_		.,	
		BLFKDHEALTH				A	Υ	2	Y	Υ	
			// WITHIN 5 SER			A	V	_	.,	V	
		DRDOLAB	DR OR DENTIS			A	Y	2	Y	Y	
		GFLR01	GROUND FL L			A	Y	2	Y	Y	
		GFLR06	GROUND FLR	LADIES R		Α	Υ	2	Υ	Υ	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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RR LADY ROOM 1F L

RR LADY ROOM 1F R

**RR HAIR SALON** 

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**RRHS** 

RRLRF1

RRLRF1L

RRLRF1R

CT0180342	BROOKFIELD OFFICE PARK ASSOCIATION	NTNC	35	Р	GW				
PWS ID PWS Name Classification Population Owner Type Primary Sou									
	Water Quality Monitoring and Compliance Schedule								
	Connecticut Department of Public Health	Drinking	g Water	Section					

Residential Commercial

1

Industrial

Combined

Agricultural

Service

Connections

Towns Served: BROOKFIELD

304 FEDERAL ROAD

Local Address (where applicable)

	Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		tage DBPR		
		RRLRF2L	RR LADY RM 2F L	A	Υ	2	Υ	-			
		RRLRF2R	RR LADY RM 2F R	Α	Υ	2	Υ				
		RRLRF3	RR LADY RM 3F	Α	Υ	2	Υ				
		RRMRF1L	RR MENS RM 1F L	Α	Υ	2	Υ				
		RRMRF1R	RR MENS RM 1F R	Α	Υ	2	Υ				
		RRMRF2L	RR MENS RM 2F L	Α	Υ	2	Υ	Υ			
		RRMRF2M	RR MENS RM 2F M	Α	Υ	2	Υ	Υ			
		RRMRF3	RR MENS RM 3F	Α	Υ	2	Υ	Υ			
		RRMRF3L	RR MENS RM 3F L	Α	Υ	2	Υ	Υ			
		RRMRF3R	RR MENS RM 3F R	Α	Υ	2	Υ	Υ			
		SFLRLS03	2ND FLR LADIES LEFT	Α	Υ	2	Υ				
		SFLRRS02	2ND FLR LADIES RIGHT	Α	Υ	2	Υ				
		TFLRLS04	3RF FLR LADIES LEFT	Α	Υ	2	Υ				
		TFLRRS05	3RD FLR LADIES RIGHT	Α	Υ	2	Υ				
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
10064	WELL	2	WELL	Α							
59400	ATMOSPHERIC STORAGE										
936	TREATMENT SYSTEM								-		

Certified	Operator	intormation
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Water System Facility: TREATMENT SYSTEM (WSF ID: 936)

Facility Classification: CLASS 1 TREATMENT PLANT Certification **Operator Name** Certification(s) Expiration **Operator Type** HURLBUT, ANDREW **CHIEF OPERATOR** 6/30/2020 WATER TREATMENT PLANT OPERATOR - CLASS II

/									-,, -
				Contact Inf	formation				
Name				Organization	n			Job Title	
Mr. John J. Scarfi				Brookfield C	Office Park		President		
Mailing Address Lin	ne One		Mailing A	Address Line Two	)		City	State	Zip Code
304 Federal Road			Suite 114	1		Brookfie	eld	СТ	06804
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress		
203-775-8757		203-797-	8706						
					_	-			

Contact Role(s): Legal Contact

C	onnectic	ut Depa	artment	of Public	Health	Drii	ıking	g Wate	r Se	ction	
	Wa	ter Qua	lity Mon	itoring a	nd Con	nplia	nce S	Schedu	ıle		
PWS ID P	WS Name					Classif	ication	Population	n Owr	ner Type	Primary Source
CT0180342 B	BROOKFIELD OFFICE PARK ASSOCIATION						NC	35		Р	GW
Local Address (where applicable)				Service	Residen	itial Co	mmerci	ial Indust	rial	Combine	ed Agricultural
304 FEDERAL ROAD			Connection	ns 1							
Towns Served: BR	OOKFIELD			1	,			1	'		
Name				Organization						Job Title	ž
Mr. Ben Stueck				Rei Property N	∕lgt						
Mailing Address Li	ne One		Mailing Add	ress Line Two				City		State	Zip Code
C/O Rei Property 8	& Asset Manage	ement, Inc	2A Ives Stree	et			Danbu	ry		СТ	06810
Business Phone	Extension	Fax	Mo	obile Phone	Emergency	/ Phone	Email A	Address			
203-744-8400	128						bstued	k@rei-pm.	net		
Contact Role(s):	Administrative	Contact		<u> </u>			-				

Contact Role(s): Administrative Contact

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0180352	BROOKFIELD PROFESSIONAL BLDG				NTNC	35	Р	GW
Local Address (where applicable)		Service	Residen	ntial Commerc		al Industri	al Combine	ed Agricultural
300 FEDERAL RO	DAD	Connections	1					

Towns Served: BROOKFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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Schedule Generation Date: 4/11/2019

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0180352	BROOKFIELD PROFESSIONAL BLDG				NTNC	35	Р	GW
Local Address (	where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
300 FEDERAL R	DAD	Connections	1					

Towns Served: BROOKFIELD

Monitoring Requirements										
Water System Facility: ENTRY POINT (WSF ID: 00700)										
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)	sticides, Herbicides and PCBs - Phase II & V (SOCS) 1 routine (RT) per thre									
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>							
	1/1/20 - 12/31/22									

	1/1/20 - 12/31/22				
Organic Chemicals (VOCS)		1 routine (RT) per three years			
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	<b>Compliance Status</b>		
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete		
	1/1/20 - 12/31/22				

## **Other Compliance Schedules**

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2020	

Public Notification Requirements										
	Compliance	Notice	<b>Public Notification</b>		PN Certi	<u>fication</u>				
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received				
Chloride MCL Violation	10/1/18 - 12/31/18	2	3/23/2019	3/1/2019	4/2/2019	3/1/2019				
Chloride MCL Violation	1/1/19 - 3/31/19	2	5/9/2019		5/19/2019					

	Water System Facility and Sampling Point Inventory										
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Sta WQP 2 D	age BPR		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ						
		BATHROOM SI	GENERATED BY BATCH	Α	Υ						
		BPB001	LAB AREA	Α	Υ	2	Υ	Υ			
		BPB002	STAFF BATHROOM SINK	Α	Υ	2	Υ	Υ			
		BPB003	BATHROOM SINK	Α	Υ	2	Υ	Υ			
		BPB004	EXAM RM 1 SINK	Α	Υ	2	Υ	Υ			
		BPB005	EXAM RM 2 SINK	Α	Υ	2	Υ	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α							
		EXAM RM 1 S	GENERATED BY BATCH	Α	Υ						
		EXAM RM 2 S	GENERATED BY BATCH	Α	Υ						
		LAB AREA	GENERATED BY BATCH	Α	Υ						
		STAFF BATHR	GENERATED BY BATCH	Α	Υ						
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT	3	ENTRY POINT	Α							
10065	WELL	2	WELL	Α							

## **Certified Operator Information**

Water System Facility:	DISTRIBUTION SYSTEM	(WSF ID: 00600)	
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Facility Classification: SMALL WATER SYSTEM Certification **Operator Name Operator Type** Certification(s) **Expiration** 

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Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0180352 BROOKFIELD PROFESSIONAL BLDG				NTNC	35	Р	GW		
Local Address (where applicable)		Service	Residen	tial	Commerci	al Industri	al Combine	ed Agricultural	
300 FEDERAL RC	)AD	Connections	1						

Connecticut Department of Public Health Drinking Water Section

Towns Served: BRC	OKFIELD								
			Certifie	d Operate	or Information				
Water System Fac	cility: DISTR	IBUTION SY	STEM (WSI	F ID: 00600)					
Facility Classification	on: SMALL WA	ATER SYSTEM							Certification
Operator Name			Operator T	уре	Certification(s)				Expiration
HURLBUT, ANDREW	V		CHIEF OPERA	TOR	WATER TREATMEN	T PLANT	OPERATOR	- CLASS II	6/30/2020
			Co	ontact Inf	ormation				
Name				Organization				Job Title	
Mr. Craig L. Froehli	ch			Cff Realty, LLC Owner					
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
14 Aragon Circle						Brookfiel	ld	СТ	06804
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ad	dress		
203-775-2500						Froballs@	@aol.com		
Contact Role(s): A	dministrative	Contact, Leg	al Contact, O	wner					
Name				Organization				Job Title	
Cff Realty, LLC									
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
14 Aramon Circle					_	Brookfiel	ld	СТ	06804
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ad	dress		

# Contact Role(s): Owner Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
CT0181102	SAINT JOSEPH SCHOOL				NTNC	200	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
159 WHISCONIE	R ROAD	Connections	1					

Towns Served: BROOKFIELD		·	
Monitoring R	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600	0)		
Chlorine Residual (0999)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Disinfectant Byproducts - TTHM & HAA5 (DBP)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
NURSES SINK (SJS002)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Lead And Copper (PBCU)		10 routine	(RT) per six months
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		·
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
			·

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Classification		Population	Owner Type	Primary Source	
CT0181102	SAINT JOSEPH SCHOOL				NTNC	200	Р	GW	
Local Address	(where applicable)	Service	Residen	itial	Commercia	al Industri	al Combin	ed Agricultural	
159 WHISCON	IER ROAD	Connections	1						

Towns Served: BROOKFIELD	
Mo	onitoring Requirements
Water System Facility: ENTRY POINT (WSF ID: 00	700)
Inorganic Chemicals (IOCS)	1 routine (RT) per three yea
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
	1/1/19 - 12/31/21
	1/1/22 - 12/31/24
Nitrate And Nitrite (NOX)	1 routine (RT) per ye
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/18 - 12/31/18 Complete
	1/1/19 - 12/31/19 Complete
	1/1/20 - 12/31/20
Pesticides, Herbicides and PCBs-Phase II (SOC2)	1 routine (RT) per three yea
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/17 - 12/31/19
	1/1/20 - 12/31/22
Pesticides, Herbicides and PCBs-Phase V (SOC5)	1 routine (RT) per three yea
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	1/1/17 - 12/31/19
	1/1/20 - 12/31/22
Organic Chemicals (VOCS)	1 routine (RT) per quart
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
ENTRY POINT (3)	10/1/18 - 12/31/18 Complete
	1/1/19 - 3/31/19 Complete
	4/1/19 - 6/30/19
	7/1/19 - 9/30/19
Water System Facility: SCHOOL WELL (WSF ID: 1	0071)
E. Coli (3014)	1 routine (RT) per quart
Sampling Point (Sampling Point ID)	Monitoring Period Collection Period Compliance Statu
WELL (2)	10/1/18 - 12/31/18
	1/1/19 - 3/31/19 Complete
	4/1/19 - 6/30/19
	7/1/19 - 9/30/19
Monthly Water System F	acility (WSF) Level Monitoring Requirements
Water System Facility: ENTRY POINT (WSFID: 007	00)
Analyte Monitoring Requirement (S	ummary Type) Operating Limit Samples Req/Month
Chlorine Entry Point Chlorine Residua	
Start Date: 1/1/2005	Compliance History: Operating Limit Monitoring
	Monitoring Period Compliance Status: Compliance Status
	11/1/2018 - 11/30/2018 N
	12/1/2018 - 12/31/2018 N
	1/1/2019 - 1/31/2019 N

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule								
PWS ID									
CT0181102	SAINT JOSEPH SCHOOL	NTNC	200	Р	GW				

Connections

Residential Commercial

1

Industrial

Combined

Agricultural

Service

Towns Served: BROOKFIELD

159 WHISCONIER ROAD

Local Address (where applicable)

Water System Facility:	ENTRY POINT (WSFID: 00700)			
Analyte	Monitoring Requirement (Summary Type)	Operating Lir	nit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (C	CHLR) Minimum: 0.	2 MG/L	Daily
<b>Start Date:</b> 1/1/2005	Cor	npliance History:	Operating Limit	Monitoring
	Mo	nitoring Period	Compliance Status	: Compliance Status:
	2/1,	/2019 - 2/28/2019		N
	3/1,	/2019 - 3/31/2019		
	4/1	/2019 - 4/30/2019		

Other Compliance Schedules							
Compliance Schedule Activity	Due Date	Achieved Date					
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012						
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013						
RESPOND TO SANITARY SURVEY	12/2/2018	11/28/2018					
CROSS CONNECTION SURVEY REPORT	3/1/2019						
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	6/30/2019						

Public Notification Requirements									
Compliance Notice <u>Public Notification</u> <u>PN Certification</u>									
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received			
Lead and Copper TT Violation	4/1/14 - 6/30/15	2	9/28/2014		10/8/2014				
Chlorine M&R Violation	10/1/14 - 10/31/14	3	1/9/2016		1/19/2016				
Chloride MCL Violation	10/1/18 - 12/31/18	2	3/23/2019	2/26/2019	4/2/2019	2/26/2019			
Chloride MCL Violation	1/1/19 - 3/31/19	2	5/9/2019		5/19/2019				
E. Coli M&R Violation	10/1/18 - 12/31/18	3	2/22/2020	2/26/2019	3/3/2020	2/26/2019			

	Wat	er System Facili	ty and Sampling P	oint Ir	vento	У		
Water					Total	Lead and		
System	Water System Facility	, ,	Sampling Point		Coliform	Copper		Stage
Facility ID	)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		SJS001	KITCHEN SINK	Р	Υ	1		
		SJS002	NURSES SINK	Α	Υ	1		Υ
		SJS003	B BATHROOM UPPER	Р	Υ	1		
		SJS004	G BATHROOM UPPER	Р	Υ	1		
		SJS005	UTILITY CLOSET UPPER	Р	Υ	1		
		SJS006	B BATHROOM LOWER	Р	Υ	1		
		SJS007	G BATHROOM LOWER	Р	Υ	1		
		SJS008	UTILITY CLOSET LOWER	Р	Υ	1		
		SJS009	B BATHROOM GYM	Р	Υ	1		
		SJS010	G BATHROOM GYM	Р	Υ	1		
		SJS011	T LOUNGE LOWER	Р	Υ	1		
		SJS012	OUTSIDE WELL PIT	Р				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Public Health	Drinking	g Water	Section	l
	Water Quality Monitoring and Con	npliance S	Schedul	e	
WS ID	PWS Name	Classification	Population	Owner Type	Primary

PWS ID	PWS Name			Classification	Population	on O	wner Type	Primary Source
CT0181102	SAINT JOSEPH SCHOOL			NTNC	200		Р	GW
Local Address (v	vhere applicable)	Service	Residen	tial Commerc	ial Indus	trial	Combine	ed Agricultural
159 WHISCONIE	R ROAD	Connections	1					

Towns Served: BROOKFIELD

	Water System Facility and Sampling Point Inventory								
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10071	SCHOOL WELL	2	WELL	Α					
54353	CONTACT TANK								
938	WATER TREATMENT- CHLORINATION								

### **Certified Operator Information**

Water System Facility: WATER TREATMENT-CHLORINATION (WSF ID: 938)

Facility Classification: CLASS 1 TREATME	ENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2020

FOLEY, JAIVIES			CHIEF OP	ERATOR	WATER TREATMEN	3/31/2020			
				<b>Contact Info</b>	ormation				
Name				Organization				Job Title	9
Reverend George F. O'neill Saint Joseph Church And School						F	Pastor		
Mailing Address Lin	ie One		Mailing A	ddress Line Two	ress Line Two			State	Zip Code
163 Whisconier Road P.O. Box 5072				Brookfield	t	СТ	06804-5072		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
203-775-1035	12	203-775-	1684		203-775-5928	luke756@	gmail.com		

Contact Role(s): Administrative Contact, Legal Contact, Owner

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Page 11

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0181112	WHISCONIER MIDDLE SCHOOL				NTNC	1,010	L	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
17 WEST WHISO	ONIER ROAD	Connections	1					

Towns Served: BROOKFIELD			
Monitoring	g Requirements		
Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00</b>	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		<b>10</b> re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	C D		: D1-1: - 11	141- 1	D: 1-:-	- TA		C	
	Connecticut Do	•							
	Water Q	Quality Monit	oring and	d Com	pliance	e Sch	edul	е	
PWS ID	PWS Name			(	Classificatio	on Pop	ulation	Owner Type I	Primary Source
CT018111		CHOOL			NTNC	1	,010	L	GW
	ress (where applicable)		Service	Residenti	al Comme	ercial I	ndustria	l Combined	d Agricultura
	WHISCONIER ROAD		Connections	1					
Towns Ser	ved: BROOKFIELD								
		Other Co	ompliance	Schedu	ıles				
Compliand	ce Schedule Activity			Di	ue Date		Achiev	ved Date	
SUBMIT LE	EAD CONSUMER NOTICE CERTI	FICATE		12/	′29/2012				
SUBMIT LE	EAD CONSUMER NOTICE CERTI	FICATE		12/	/29/2013				
CROSS CO	NNECTION SURVEY REPORT			3/	1/2020				
		Public Not	ification R	equirer	nents				
		C	ompliance	Notice	Public	c Notific	ation	PN Ce	rtification
Violation/	'Situation		Period	Tier	Require	ed Pe	rformed	Due to DPF	H Received
Total Colif	orm MCL Violation	8/1/	/13 - 8/31/13	2	10/12/20	013		10/22/2013	3
	Wate	er System Facili	ty and Sar	npling F	Point In	vento	ry		
Water						Total	Lead o	and	
System	Water System Facility	Sampling Point		nt	(	Coliform			Stage
Facility ID		ID .	Description		Status	Rule	Rule	Tier Asbestos	WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	GENERIC DIST		Α	Υ			
		DOWNSTREAM			A				
		UPSTREAM	WITHIN 5 SER		A				
		WMS001	TEACHERS RC		A		1	Y	
		WMS002	BOYS LOCKER		A		2		
		WMS003	B WING GIRLS		A		2		
		WMS004 WMS005	CAFETERIA FO	_	Α		2		
		WMS006	NURSE CLINIC		A				
		WMS007	A WING BOYS		A A		1		
		WMS008	MAIN OFFICE		A		1		
		WMS009	C WING FOUN		_		_		
		WMS010	KITCHEN SINK		Α		2 1		
		WMS011	CAFETERIA HA		A A	Υ	1		
		WMS011	MENS LAV CU		A	Y			
00700	ENTRY POINT	3	ENTRY POINT	JI NOOW	A	ı			
10072	WELL #1	2	WELL #1		A				
100/2	** 17	۷	** LLL #1						
47596	ATMOSPHERIC STORAGE								

# Certified Operator Information Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

54093 WELL #2

Facility Classification:SMALL WATER SYSTEMCertificationOperator NameOperator TypeCertification(s)ExpirationTOMASCAK, THOMAS S.CHIEF OPERATORDISTRIBUTION SYSTEM OPERATOR - CLASS I12/31/2021WATER TREATMENT PLANT OPERATOR - CLASS I6/30/2019

WELL #2

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Water Quality Monitoring and Compliance Schedule								
PWS ID PWS Name			Clas	ssification	Population	Owner Type	Primary Source	
CT0181112 WHISCONIER MIDDLE SCHOOL					NTNC	1,010	L	GW
Local Address (where applicable) Se			Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
17 WEST WHISC	Connections	1						

Connecticut Department of Public Health Drinking Water Section

			Co	ontact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Kenneth Post			Brookfield P	ublic Schools		Dir Bus & O	)ps		
Mailing Address Lir	ie One		Mailing Addr	ess Line Two			City	State	Zip Code
PO Box 5194						Brookfie	eld	СТ	06804
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	e Email Address			
203-775-7629						postk@brookfieldps.org			
Contact Role(s): A	dministrative (	Contact	·						
Name				Organization	1			Job Title	
Mr. Stephen Dunn				Town of Bro	okfield		First Selecti	man	
Mailing Address Lir	ie One		Mailing Addr	ress Line Two		City		State	Zip Code
100 Pocono Road						Brookfie	eld	СТ	06804
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Address			
203-775-7301						sdunn@	brookfieldct	gov	
Contact Role(s): Lo	egal Contact		-		·				

#### Please note the following:

Towns Served: BROOKFIELD

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0181122	HUCKLEBERRY HILL ELEMENTARY SCHOOL				NTNC	830	L	GW
Local Address (v	vhere applicable)	Service	Resider	itial	Commercia	al Industri	al Combine	ed Agricultural
100 CANDLEWO	OD LAKE ROAD	Connections	1					

Towns Served: BROOKFIELD			
Monitorir	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0181122	HUCKLEBERRY HILL ELEMENTARY SCHOOL				NTNC	830	L	GW
Local Address (v	vhere applicable)	Service	Resider	itial	Commercia	al Industri	al Combine	ed Agricultural
100 CANDLEWO	OD LAKE ROAD	Connections	1					

Towns Served: BROOKFIELD

Monitoring Requirements									
Water System Facility: ENTRY POINT (WSF ID: 00700)									
Organic Chemicals (VOCS) 1 routine (RT) per year									
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>						
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete						

# Compliance Schedules Compliance Schedule Activity Due Date Achieved Date SUBMIT LEAD CONSUMER NOTICE CERTIFICATE 12/29/2012 CROSS CONNECTION SURVEY REPORT 3/1/2020

1/1/19 - 12/31/19

1/1/20 - 12/31/20

Complete

	W	ater System Facili	ty and Sampling Po	oint Ir	vento	у		
Water System	Water System Facility	Sampling Point	Sampling Point		Total Coliform	Lead and Copper		Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		HHS001	600 WING LADIES LAV	Α		1		
		HHS002	600 WING MENS LAV	Α		1		
		HHS003	200 WING MENS LAV	Α		2		
		HHS004	300 WING GIRLS LAV	Α		2		
		HHS005	400 WING BOYS LAV	Α		2		
		HHS006	100 WING BOYS LAV	Α	Υ	2		
		HHS007	KITCHEN SINK	Α	Υ	2	Υ	
		HHS008	MAIN OFFICE WORK SNK	Α		1		
		HHS009	200 WING STAFF LAV	Α		2		
		HHS010	LIBRARY SINK	Α		1		
		HHS011	ROOM 204	Α	Υ			
		HHS012	STAFF BATH CUST RM	Α	Υ			
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10073	WELL 1	2	WELL	Α				
11019	WELL 2	2	WELL 2	Α				
47592	ATMOSPHERIC STORAGE							
47594	PRESSURE STORAGE							

Certified Operator Information										
Water System Facility: <b>DISTRIB</b>	UTION SYSTEM (WSF ID: 006	00)								
Facility Classification: SMALL WATER SYSTEM										
Operator Name	Operator Type	Certification(s)	Expiration							
TOMASCAK, THOMAS S.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2021							

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	or and or any or any or any					,			
Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Pri و	mary Source
CT0181122	TO181122 HUCKLEBERRY HILL ELEMENTARY SCHOOL					830	L		GW
Local Address (v	vhere applicable)	Service	Residentia		Commerci	al Indust	rial Combin	ied	Agricultural
100 CANDLEWO	Connections	1							
Towns Served: E	BROOKFIELD								

Connecticut Department of Public Health Drinking Water Section

			Certifi	ed Operat	or Information	1				
Water System Fac	cility: DISTR	IBUTION SY	STEM (W	SF ID: 00600)						
Facility Classification	on: SMALL WA	TER SYSTEM	l						Certification	
Operator Name			Operator	Туре	Certification(s)				Expiration	
					WATER TREATMEN	IT PLANT	OPERATOR -	- CLASS I	6/30/2019	
			(	Contact Inf	ormation					
Name				Organization	l			Job Title		
Mr. Kenneth Post Brook					d Public Schools Dir Bus & Ops					
Mailing Address Line One			Mailing Address Line Two				City State		Zip Code	
PO Box 5194						Brookfie	ld	СТ	06804	
Business Phone	Extension	Fax	N	/lobile Phone	Emergency Phone	Email Ac	ldress			
203-775-7629						postk@k	prookfieldps	.org		
Contact Role(s): A	dministrative	Contact								
Name				Organization	l			Job Title		
Mr. Stephen Dunn				Town of Broo	okfield		First Selectr	man		
Mailing Address Lin	e One		Mailing Ad	dress Line Two			City	State	Zip Code	
100 Pocono Road					Brookfie	ld	СТ	06804		
Business Phone	Extension	Fax	N	Nobile Phone	Emergency Phone Email Address					
203-775-7301						sdunn@brookfieldct.gov				
Contact Role(s): Le	egal Contact									

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of Public Health Drinking Water Section										
	*					<b>,</b>		OH			
	Water Quality Monito	oring and	d Con	npl	iance S	Schedul	e				
PWS ID PWS Name					ssification	Population	Owner Type		rimary Source		
CT0181132	CENTER ELEMENTARY SCHOOL				NTNC	527	L		GW		
Local Address (where applicable)		Service	Resider		Commerci	al Industri	al Combine		Agricultural		
8 OBTUSE HILI	Connections	1									

8 OBTUSE HILL

Towns Served: BROOKFIELD	,		
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		10 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0181132 CENTER ELEMENTARY SCHOOL					NTNC	527	L	GW
Local Address (where applicable)		Service	Residential		Commerci	al Industri	al Combine	ed Agricultural
8 OBTUSE HILL		Connections	1					

Towns Served: BROOKFIELD

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013								
CROSS CONNECTION SURVEY REPORT	3/1/2020								

	Wat	er System Facili	ty and Sampling P	oint Ir	iventoi	ry		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	А	Υ			
		CES000	GENERATED BY BATCH	Α	Υ			
		CES001	FOUNTAIN BY GYM	Α		2		
		CES002	BOYS LAV WEST	Α		2		
		CES003	FOUNTAIN BOILER RM	Α		2		
		CES004	GIRLS LAV WEST	Α		2		
		CES005	LADIES RM BY GYM	Α		2		
		CES006	FOUNTAIN BY RM 22	Α		2		
		CES007	BOYS LAV EAST	Α		2		
		CES008	OTPT ROOM	Α		2		
		CES009	KITCHEN	Α		2		
		CES010	GIRLS LAV EAST	Α		2		
		CES011	TEACHERS ROOM SINK	Α	Υ		Υ	
		CES012	TEACHERS RM LAV SINK	Α	Υ			
		CES013	NURSE CLINIC SINK	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10074	WELL #1	2	WELL	Α				
47602	ATMOSPHERIC STORAGE							
47604	PRESSURE STORAGE							
54095	WELL #2	2	WELL #2	Α				

### **Certified Operator Information**

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SY	YSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
TOMASCAK, THOMAS S.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2021
		WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2019

	Co	ontact Information				
Name		Organization	Job Title			
Mr. Kenneth Post	Brookfield Public Schools		Dir Bus & 0	Ops		
Mailing Address Line One Mailing Addr		ress Line Two		City	State	Zip Code

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	Connectic	ut Departn	nent (	of Public	: Health	Drir	king	Water	Section	n		
	Wa	ter Quality	Mon	itoring a	and Con	nplia	nce S	chedul	e			
PWS ID	PWS Name					Classifi	cation P	opulation	Owner Typ	e Pr	imary Source	
CT0181132	CENTER ELEMEN	ITARY SCHOOL				NT	NC	527	L		GW	
Local Address (w	here applicable)			Service	Resider	tial Co	mmercial	al Combi	ned	Agricultural		
8 OBTUSE HILL				Connection	ons 1							
Towns Served: BI	ROOKFIELD											
PO Box 5194						Brookfield			СТ		06804	
Business Phone	e Extension	Fax	Mo	bile Phone	Emergency	/ Phone	Email Ad	ddress				
203-775-7629							postk@brookfieldps.org					
Contact Role(s):	Administrative	Contact										
Name				Organization					Job Ti	tle		
Mr. Stephen Dur	ın			Town of Broo	okfield			First Selec	tman			
Mailing Address	Line One	Mai	ling Addr	ess Line Two				City	State	5	Zip Code	
100 Pocono Road	d						Brookfie	eld	СТ		06804	
Business Phone	e Extension	Fax	Mo	bile Phone	Emergency	/ Phone	Email Ad	ddress				
203-775-7301							sdunn@	brookfield	ct.gov			
Contact Role(s):	Legal Contact				•							

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0181142	BROOKFIELD HIGH SCHOOL				NTNC	995	L	GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
45 LONG MEAD	OW HILL ROAD	Connections	1					

Towns Served: BROOKFIELD			
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		<b>10</b> re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT - WELLS 2, 3, 4, & 6 (V	VSF ID: 00701)		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2, 3, 4, & 6 (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2, 3, 4, & 6 (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2, 3, 4, & 6 (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - WELLS 2, 3, 4, & 6 (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

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# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0181142	BROOKFIELD HIGH SCHOOL				NTNC	995	L	GW
Local Address (v	where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
45 LONG MEAD	OW HILL ROAD	Connections	1					

Towns Served: BROOKFIELD

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2010							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2011							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2011							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013							
CROSS CONNECTION SURVEY REPORT	3/1/2020							

Public Notification Requirements								
Compliance Notice <u>Public Notification</u> <u>PN Certification</u>						<u>fication</u>		
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received		
Octal Coliform MCL Violation         9/1/14 - 9/30/14         2         11/14/2014         11/24/2014								

	Water System Facility and Sampling Point Inventory								
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	А	Υ				
		BHS001	HOME ECONOMICS RM	Α		2			
		BHS002	SAIL ROOM SINK	Α		2			
		BHS003	CUSTODIAL OFFICE SNK	Α		2			
		BHS004	KITCHEN SINK	Α		2			
		BHS005	CAFE B FOUNTAIN	Α		2			
		BHS006	600 WING GIRLS LAV	Α		2			
		BHS007	MAIN OFFICE FOUNTAIN	Α		2			
		BHS008	100 WING FOUNTAIN	Α		2			
		BHS009	BOYS LOCKER RM SINK	Α		2			
		BHS010	TEACHERS ROOM SINK	Α		2	Υ		
		BHS011	KITCHEN HAND WASH	Α	Υ				
		BHS012	BOY BATH BY ROOM 110	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00701	ENTRY POINT - WELLS 2, 3, 4, & 6	3	EP - WELLS 2, 3, 4,	Α					
10076	WELL #2	2	WELL #2	Α					
47608	PRESSURE STORAGE								
54085	WELL #3	2	WELL #3	Α					
54087	WELL #4	2	WELL #4	Α					
54091	WELL #6	2	WELL #6	Α					
56645	PUMP STATION								
61063	ATMOSPHERIC STORAGE								
61065	BLADDER TANKS								

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	Water Quality Monitoring and Compliance Schedule								
PWS ID PWS Name				Clas	ssification	Population	Owner Type	Primary Source	
CT0181142	BROOKFIELD HIGH SCHOOL				NTNC	995	L	GW	
Local Address (where applicable) Service Reside				itial	Commercia	al Industri	al Combine	ed Agricultural	
45 LONG MEADOW HILL ROAD Connections 1									

Connecticut Department of Public Health Drinking Water Section

Towns Served: BRC	OKFIELD			·				·	
			Certifie	d Operate	or Information				
Water System Fa	cility: DISTR	IBUTION S	YSTEM (WS	F ID: 00600)					
Facility Classification	on: CLASS 1 D	ISTRIBUTION	SYSTEM						Certification
Operator Name			Operator T	уре	Certification(s)				Expiration
TOMASCAK, THOM	AS S.		CHIEF OPERA	ATOR	DISTRIBUTION SYS	TEM OPE	RATOR - CLA	ASS I	12/31/2021
					WATER TREATMEN	IT PLANT	OPERATOR	- CLASS I	6/30/2019
			Co	ontact Inf	ormation				
Name	Organization Job Title								
Mr. Dan Caldwell				Brookfield Pu	ublic Schools		Facilities N	1anager	
Mailing Address Lir	ldress Line One		Mailing Addr	ress Line Two			City	State	Zip Code
			100 Pocono	Road		Brookfie	ld	СТ	06804
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
203-775-7700	7709					caldwell	d@brookfie	eldps.org	
Contact Role(s): A	dministrative	Contact							
Name				Organization				Job Title	
Town of Brookfield	J								
Mailing Address Lir	ne One	Mailing Address Line Two City State			State	Zip Code			
45 Long Meadow H	Iill Rd		P.O. Box 510	06		Brookfie	ld	СТ	06804
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		

Contact Role(s): Legal Contact, Owner

#### Please note the following:

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- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0189013	SILVERMINE ROAD WATER SYSTEM				NTNC	50	Р	GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
SILVERMINE RO	AD	Connections			6			

Towns Served: BROOKFIELD			·
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
Chlorine Residual (0999)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Haloacetic Acids (2456)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
559A UNIT 1 FRONT OFFICE (SLVRMINE015)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Trihalomethanes (2950)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
559B UNIT 9 KITCHENETTE (SLVRMINE024)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		

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Connecticut Department	of Public Health Drinki	ng Water Sec	ction
*	itoring and Compliance	O	
PWS ID PWS Name	Classification		er Type Primary Source
CT0189013 SILVERMINE ROAD WATER SYSTEM	NTNC	50	P GW
Local Address (where applicable)	Service Residential Commo		Combined Agricultural
SILVERMINE ROAD	Connections 6	erciai iliuustilai C	Lombined Agricultural
Towns Served: BROOKFIELD	0		
	itoring Requirements		
Water System Facility: ENTRY POINT (WSF ID: 0070	<u> </u>		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
.,	1/1/19 - 12/31/19		•
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOC	S)	1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Water System Facility: WELL 4 (WSF ID: 10078)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 4 (2)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: WELL 3 (WSF ID: 10079)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
WELL 3 (2)	10/1/18 - 12/31/18		Out of Service
	1/1/19 - 3/31/19		Out of Service
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: WELL 1 (WSF ID: 10081)			
E. Coli (3014)			ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 1 (2)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		

### Monthly Water System Facility (WSF) Level Monitoring Requirements

7/1/19 - 9/30/19

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# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189013	SILVERMINE ROAD WATER SYSTEM				NTNC	50	Р	GW
Local Address (where applicable)		Service	Residentia		Commerci	al Industri	al Combin	ed Agricultural
SILVERMINE ROA	AD	Connections			6			

Towns Served: BROOKFIELD

Water System Facility:	ENTRY POINT (WSFID: 00700)				
Analyte	Monitoring Requirement (Summary Ty	rpe)	<b>Operating Limit</b>		Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitorin	ng (CHLR)	Minimum: 0.2 MG/L		Daily
Start Date: 12/1/2009	)	Compliance	History:	Operating Limit	Monitoring
		Monitoring	Period	Compliance Status	: Compliance Status:
		11/1/2018 -	11/30/2018		N
		12/1/2018 -	12/31/2018		N
		1/1/2019 - 1	/31/2019		N
		2/1/2019 - 2	/28/2019		N
		3/1/2019 - 3	/31/2019		
		4/1/2019 - 4	/30/2019		

### **Other Compliance Schedules**

Compliance Schedule Activity

CROSS CONNECTION SURVEY REPORT

3/1/2019

CNOSS CC	DNNECTION SURVEY REPORT		3/1	/2019				
	Wat	ter System Facili	ty and Sampling Po	oint In	ventor	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		SILMINE001	BLDA	Р	Υ	2		
		SILMINE002	TAP NEAR BALTIC LUMB	Р		2		
		SILMINE003	PUMP STATION TAP	Р		2		
		SILMINE004	BLD ACROSS PUMP ST	Р		2		
		SILMINE005	DADE BEHRING BLB	Р		2		
		SLVRMINE001	100 SLVRMINE LADIES	Α	Υ	2		
		SLVRMINE002	100 SLVRMINE MENS RM	Α	Υ	2		
		SLVRMINE003	100 SLVRMINE BREAK R	Α	Υ	2	Υ	
		SLVRMINE004	100 SLVRMINE KIT HAN	Α	Υ	2		
		SLVRMINE005	100 SLVRMINE KIT DIS	Α	Υ	2		
		SLVRMINE006	595 FEDERAL ROAD	Α	Υ	2		
		SLVRMINE007	101 SLVRMINE LADIES	Α	Υ	2		
		SLVRMINE008	101 SLVRMINE MENS RM	Α	Υ	2		
		SLVRMINE009	101 SLVRMINE KITCHEN	Α	Υ	2		
		SLVRMINE010	559A UNIT 1 MENS LOC	Α	Υ	2		
		SLVRMINE011	559A UNIT 1 MENS LOC	Α	Υ	2		
		SLVRMINE012	559A UNIT 1 LADIES L	Α	Υ	2		
		SLVRMINE013	559A UNIT 1 LADIES L	Α	Υ	2		
		SLVRMINE014	559A UNIT 1 UNISEX B	Α	Υ	2		
		SLVRMINE015	559A UNIT 1 FRONT OF	Α	Υ	2		Υ
		SLVRMINE016	559A UNIT 9 BATH 1 S	Α	Υ	2		
		SLVRMINE017	559A UNIT 9 BATH 2 S	Α	Υ	2		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule								
PWS ID PWS Name				Classification		Population	Owner Type	Pri	mary Source
CT0189013	SILVERMINE ROAD WATER SYSTEM				NTNC	50	Р		GW
Local Address (where applicable) Service Resid			Residen	tial Commerci		al Industri	al Combine		Agricultural
ILVERMINE ROAD Connections					6				

Towns Served: BROOKFIELD

		Water System Facili	ty and Sampling P	oint Ir	nventoi	ſy		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR
		SLVRMINE018	559A UNIT 9 STORE FR	Α	Υ	2	Υ	
		SLVRMINE019	559A UNIT 9 LARGE KI	Α	Υ	2		
		SLVRMINE020	559A UNIT 9 BACK KIT	Α	Υ	2		
		SLVRMINE021	559B UNIT 1 BATH	Α	Υ	2		
		SLVRMINE022	559B UNIT 9 LADIES R	Α	Υ	2		
		SLVRMINE023	559B UNIT 9 MENS ROO	Α	Υ	2		
		SLVRMINE024	559B UNIT 9 KITCHENE	Α	Υ	2		Υ
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10078	WELL 4	2	WELL 4	Α				
10079	WELL 3	2	WELL 3	Α				
10081	WELL 1	2	WELL 1	Α				
48058	ATMOSPHERIC STORAG	GE						
48060	PRESSURE STORAGE 1							
48062	PRESSURE STORAGE 2							
48064	PRESSURE STORAGE 3							
56543	TREATMENT PLANT							

56543 TREATM	ENT PLANT									
			Cert	ified Operat	or Information	)				
Water System Fac	cility: TREAT	MENT PLA	NT (WS	F ID: 56543)						
Facility Classification	on: CLASS 1 TF	REATMENT F	PLANT						Certification	
Operator Name			Opera	tor Type	Certification(s)				Expiration	
BLACK, RON W.			CHIEF O	PERATOR	WATER TREATMEN	IT PLANT	OPERATOR -	- CLASS II	6/30/2020	
					DISTRIBUTION SYS	ГЕМ ОРЕГ	RATOR - CLA	SS II	6/30/2020	
GIORDANO, DAVID S.			ASSIGNED OPERATOR		WATER TREATMEN	- CLASS I	6/30/2020			
					DISTRIBUTION SYS	SS II	6/30/2020			
				Contact Inf	ormation					
Name				Organization	l			Job Title		
Mr. Roy Young				Silvermine D	evelopment Corp					
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code	
88 Rosehill Avenue			P.O. Box	1157		Danbury		СТ	06810	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad				
203-744-2090						royy@poly-fil.com				
Contact Role(s): A	dministrative	Contact, Leg	gal Conta	ct, Owner		1				

Connecticut Department of Public Health Drinking Water Section	1
Water Quality Monitoring and Compliance Schedule	

	vvater quarity monn	u don	omphance senedate						
PWS ID PWS Name			Classification		Population	Owner Type	Primary Source		
CT0189013	CT0189013 SILVERMINE ROAD WATER SYSTEM				NTNC	50	Р	GW	
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural	
SILVERMINE ROAD		Connections			6				
		•					•	· · · · · · · · · · · · · · · · · · ·	

Towns Served: BROOKFIELD

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189093	FELCHRIS - 61 COMMERCE DRIVE				NTNC	25	Р	GW
Local Address (where applicable)		Service	Residential		Commercia	al Industri	al Combine	ed Agricultural
61 COMMERCE DRIVE		Connections	1					

Towns Served: BROOKFIELD			·
Monitorin	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		·
Pesticides, Herbicides and PCBs-Phase V (SOC5)	· ·	1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		-
· /	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Dep	partment of	Public F	lealth	Dri	nkin	g Wa	ater	Se	ction		
	Water Qu	ality Monit	oring an	d Con	nplia	ance	Sche	edul	e			
PWS ID	PWS Name				Classi	fication	on Population		n Owner Typ		pe Primary Source	
CT0189093	FELCHRIS - 61 COMMERCE	DRIVE			N <sup>-</sup>	TNC	2	.5		Р	GW	
Local Addre	ss (where applicable)		Service	Residen	ntial Co	ommer	cial In	dustria	al	Combined	Agricultura	
61 COMME	RCE DRIVE		Connections	S 1								
Towns Serve	ed: BROOKFIELD											
		Monito	oring Requ	uireme	nts							
Water Syst	em Facility: ENTRY POINT	(WSF ID: 00700)										
Organic Cl	hemicals (VOCS)								1 r	outine (F	RT) per year	
Sampli	ing Point (Sampling Point ID)			Monitori	ing Per	iod	Collecti	ion Per		=	iance Status	
ENTRY	POINT (3)			1/1/18 -	12/31/	/18				Co	mplete	
				1/1/19 -	12/31/	/19						
				1/1/20 -	12/31/	/20						
Water Syst	em Facility: WELL (WSF ID	: 10086)										
E. Coli (30	014)							1	rou	tine (RT)	per quarter	
Sampli	ing Point (Sampling Point ID)			Monitori	ing Per	riod	Collecti	ion Per	riod	Compl	iance Status	
WELL (	2)			10/1/18	- 12/31	/18				Co	mplete	
				1/1/19	- 3/31/	19				Co	mplete	
				4/1/19	- 6/30/	19						
				7/1/19	- 9/30/	19						
		Other Co	ompliance	Sched	dules							
Compliance	Schedule Activity				Due Do	ate		Achie	ved L	Date		
CROSS CON	NECTION EXEMPTION				3/1/20	21						
	Water	System Facili	ity and Sa	mpling	Poin	t Inv	entor	у				
Water						7	Total	Lead (	and			
•	Nater System Facility	Sampling Point		int			liform	Copp			Stage	
Facility ID		ID	Description		St	atus	Rule	Rule	Tier	Asbestos	WQP 2 DBF	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTIO	N SYSTEM	1	Α	Υ					
		DOWNSTREAM	WITHIN 5 SEI	RVICE COI	N	Α						
		L001	KITCHEN SIN	K		Р	Υ	1				
		L002	LADIES RM L			Р	Υ	1				
ı		L003	LADIES RM R	_		Р	Υ	1				
ı		L004	LADIES RM M	1 SINK		Р	Υ	1				
		L005	MENS RM L S	SINK		Р	Υ	1				
		L006	MENS RM R S			Р	Υ	1				
		L007	ENG RM K SII	NK	K I		Υ	1				

45012 WATER TREATMENT											
Certified Operator Information											
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)											
Facility Classification: SMALL WATER SYST	EM		Certification								
Operator Name	Operator Type	Certification(s)	Expiration								
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019								

ENG RM R RM

**ENTRY POINT** 

WELL

WITHIN 5 SERVICE CON

Р

Α

Α

Α

Υ

1

L008

**UPSTREAM** 

3

2

00700

10086

**ENTRY POINT** 

WELL

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189093	FELCHRIS - 61 COMMERCE DRIVE				NTNC	25	Р	GW
Local Address (	where applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
61 COMMERCE	DRIVE	Connections	1					

Towns Served: BROOKFIELD

			Contact Inf	ormation				
Name				1			Job Title	
ardo			Felchris			Owner		
e One		Mailing	Address Line Two			City	State	Zip Code
!					Brookfie	ld	СТ	06804
Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
100	203-775-4	4886		203-241-6944	ab@ABELECTRONICSINC.com			
	e One Extension	e One Extension Fax	e One Mailing Extension Fax	Organization  ardo  Felchris  e One  Mailing Address Line Two  Extension  Fax  Mobile Phone	e One Mailing Address Line Two  Extension Fax Mobile Phone Emergency Phone	Organization  Felchris  e One Mailing Address Line Two  Brookfie  Extension Fax Mobile Phone Emergency Phone Email Ac	Organization  Felchris Owner  e One Mailing Address Line Two City Brookfield  Extension Fax Mobile Phone Emergency Phone Email Address	Organization Job Title  ardo Felchris Owner  e One Mailing Address Line Two City State Brookfield CT  Extension Fax Mobile Phone Emergency Phone Email Address

### Contact Role(s): Administrative Contact, Legal Contact, Owner

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189353	BROOKFIELD REGIONAL YMCA				NTNC	100	Р	GW
Local Address (v	where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
2 HUCKLEBERRY	HILL ROAD	Connections	1					

Towns Served: BROOKFIELD			
Monitorir	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

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# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189353	BROOKFIELD REGIONAL YMCA				NTNC	100	Р	GW
Local Address (v	where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
2 HUCKLEBERRY	HILL ROAD	Connections	1					

Towns Served: BROOKFIELD

Monitoring Requirements										
Water System Facility: ENTRY POINT (WSF ID: 00700)										
Organic Chemicals (VOCS)		1 rc	outine (RT) per year							
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>							
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete							
	1/1/19 - 12/31/19		Complete							
	1/1/20 - 12/31/20									

Other Compliance Schedules										
Compliance Schedule Activity	Due Date	Achieved Date								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012									
CROSS CONNECTION SURVEY REPORT	3/1/2020									

	Water 9	System Facili	ty and Sampling P	oint Ir	nventor	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPI
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Υ	N		<u>·</u>
		BYMCA001	GIRLS BATHROOM SINK	Α	Υ	N		
		BYMCA002	BOYS BATHROOM SINK	Α	Υ	N		
		BYMCA003	I/T ROOM SINK	Α	Υ	N		
		BYMCA004	TWOS ROOM SINK	Α	Υ	N		
		BYMCA005	THREES ROOM SINK	Α	Υ	N		
		BYMCA006	KITCHEN SINK	Α	Υ	N		
		BYMCA006 -	GENERATED BY BATCH	Α	Υ			
		BYMCA007	MENS LOCKER SINK	Α	Υ	N		
		BYMCA007 -	GENERATED BY BATCH	Α	Υ			
		BYMCA008	WOMENS LOCKER SINK	Α	Υ	N		
		BYMCA008 -	GENERATED BY BATCH	Α	Υ			
		BYMCA009	WOMENS HEALTH SINK	Α	Υ	N		
		BYMCA009 -	GENERATED BY BATCH	Α	Υ			
		BYMCA010	MENS HEALTH SINK	Α	Υ	N		
		BYMCA010 -	GENERATED BY BATCH	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10101	WELL #2	2	WELL #2	Α				
10102	WELL #1	2	WELL #1	Α				
60864	ATMOSPHERIC STORAGE OLD							
60865	ATMOSPHERIC STORAGE TANK NEW							
937	WATER TREATMENT							

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
CT0189353	CT0189353 BROOKFIELD REGIONAL YMCA				NTNC	100	Р	GW			
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural			
2 HUCKLEBERRY HILL ROAD		Connections	1								

Connecticut Department of Public Health Drinking Water Section

Towns Served: BRO	OKFIELD									
			Certifie	d Operate	or Information	)				
Water System Fac	cility: WATER	TREATM	ENT (WSF I	D: 937)						
Facility Classification	on: CLASS 1 TRE	ATMENT P	LANT						Certification	
Operator Name			Operator Type		Certification(s)				Expiration	
TOMASCAK, THOM	AS S.		CHIEF OPERATOR		DISTRIBUTION SYSTEM OPERATOR - CLASS I				12/31/2021	
					WATER TREATMENT PLANT OPERATOR - CLASS I			6/30/2019		
			Co	ntact Inf	ormation					
Name				Organization	1	Job Title			2	
Regional YMCA of	Western Conne	cticut								
Mailing Address Line One Mailing			Mailing Addr	Address Line Two			City	State	Zip Code	
2A Huckleberry Hill Rd						Brookfie	eld	СТ	06804	
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	cy Phone Email Address				
Contact Role(s): Le	egal Contact, O	wner								
Name				Organization	nization Job Title					
Ms. Gail Null				Regional YM	al YMCA of Western Ct Vip of Operations					
Mailing Address Line One Mailing A			Mailing Addr	ess Line Two	o City State			State	Zip Code	
2 Huckleberry Hill Rd					Brookfie	ed .	СТ	06804		
Business Phone	Extension	Fax	Мс	bile Phone	e Phone Emergency Phone Email Address					
203-775-4444	119				gnull@regionalymca.org					
Contact Role(s): A	dministrative C	ontact			_					

# Please note the following:

Towns Served: BROOKEIELD

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name				ssification	Population	Owner Type	Primary Source
CT0189483	CANDLEWOOD LAKE SHOPPING PLAZA				NTNC	25	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
14 CANDLEWOOD LAKE LANE		Connections			11			

Towns Served: BROOKFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Chlorine Residual (0999)		ine (RT) per quarter	
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Haloacetic Acids (2456)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
JOY HALLMARK BATH (CWPLAZA009)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Trihalomethanes (2950)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
MICHAELS CLASS SINK (CWPLAZA013)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department o	f Public H	ealth [	) rinkin	g Water	Secti	on		
	Water Quality Monit	toring and	d Comp	oliance	Schedul	e			
PWS ID	PWS Name		С	lassification	Population	Owner 1	Type Pr	imary Source	
CT0189483	CANDLEWOOD LAKE SHOPPING PLAZA			NTNC	25	Р		GW	
Local Address (	where applicable)	Service	Residentia	Commerc	cial Industria	al Con	nbined	Agricultural	
14 CANDLEWO	OD LAKE LANE	Connections		11					
Towns Served:	BROOKFIELD					'			
	Monit	oring Requ	irement	ts					
Water System	n Facility: ENTRY POINT (WSF ID: 00700	)							
Nitrate And I	Nitrite (NOX)					1 rou	tine (R	T) per year	
Sampling	Point (Sampling Point ID)	1	Monitoring Period Collection Period Compliance Sta						
ENTRY PO	INT (3)		1/1/18 - 12/31/18					mplete	
		:	1/1/19 - 12	/31/19					
			1/1/20 - 12	/31/20					
Pesticides, H	erbicides and PCBs - Phase II & V (SOCS)				1 rou	tine (R	Γ) per t	hree years	
Sampling	Point (Sampling Point ID)	1	Monitoring	Period	Collection Per	riod	Complic	ance Status	
ENTRY PO	INT (3)		1/1/17 - 12	/31/19					
			1/1/20 - 12	/31/22					
Organic Cher	micals (VOCS)				1	routine	e (RT) ¢	er quarter	
Sampling	Point (Sampling Point ID)		Monitoring	Collection Period Compliance Status					
ENTRY PO	INT (3)	1	10/1/18 - 12/31/18			Complete			
			1/1/19 - 3/31/19				Complete		
			4/1/19 - 6,	/30/19					
			7/1/19 - 9,	/30/19					
Water System	Facility: WELL #1 (WSF ID: 10804)								
E. Coli (3014	.)				1	routine	e (RT) ¢	er quarter	
Sampling	1	Monitoring	Period	Collection Period Compliance S					
WELL #1 (	WELL #1 (2)			2/31/18	Complete				
			1/1/19 - 3,	/31/19			Cor	mplete	
			4/1/19 - 6,	/30/19					
			7/1/19 - 9,	/30/19					
Water System	Facility: WELL #2 (WSF ID: 10805)								
E. Coli (3014	.)				1	routine	e (RT) þ	er quarter	
Sampling	Point (Sampling Point ID)		Monitoring	Period	Collection Per	riod	Compliance Status		
WELL #2 (	WELL #2 (2)			2/31/18				mplete	
			1/1/19 - 3,				Out o	of Service	
		4/1/19 - 6/30/19							
			7/1/19 - 9,	/30/19					
Water System	Facility: WELL #5 (WSF ID: 10808)								
E. Coli (3014	•							er quarter	
Sampling	Point (Sampling Point ID)		Monitoring		Collection Period Compliance				
WELL #5 (	2)		.0/1/18 - 12					mplete	
			1/1/19 - 3,				Cor	mplete	
			4/1/19 - 6/30/19						

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Monthly Water System Facility (WSF) Level Monitoring Requirements

7/1/19 - 9/30/19

# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C					ssification	Population	Owner Type	Prin	nary Source
CT0189483	CANDLEWOOD LAKE SHOPPING PLAZA				NTNC	25	Р		GW
Local Address (where applicable)		Service	Resider	itial Commerc		al Industri	al Combin	ned /	Agricultural
14 CANDLEWOO	DD LAKE LANE	Connections			11				

Towns Served: BROOKFIELD

Water System Facility:	ENTRY POINT (WSFID: 00700)			
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	t	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2	MG/L	Daily
<b>Start Date: 1/1/2005</b>	Complianc	Compliance History:		Monitoring
	Monitoring	Period	Operating Limit Compliance Status	: Compliance Status:
	11/1/2018	- 11/30/2018		N
	12/1/2018	- 12/31/2018		N
	1/1/2019 -	1/31/2019		N
	2/1/2019 -	2/28/2019	·	N
	3/1/2019 -	3/31/2019		
	4/1/2019 -	4/30/2019		

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
CONSULT WITH THE DEPARTMENT	10/13/2018	9/14/2018							
ADDRESS CONTAMINATION	1/11/2019								
CROSS CONNECTION SURVEY REPORT	3/1/2020								

CINOSS CC	DININECTION SURVEY REPORT		3/ 1	/2020				
	Wat	er System Facili	ity and Sampling Po	oint Ir	vento	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ			
		CWPLAZA001	BB&B FRONT MENS RM	Α	Υ	2		
		CWPLAZA002	BB&B KITCHENETTE	Α	Υ	2		
		CWPLAZA003	NAIL&SPA KITCHETTE	Α	Υ	2		
		CWPLAZA004	RESTAURANT FOOD SINK	Α	Υ	2		
		CWPLAZA005	GNC CUSTODIAL SINK	1	Υ	2		
		CWPLAZA006	GNC BATHROOM	Α	Υ	2		
		CWPLAZA007	BAGELMAN SINK 1	Α	Υ	2		
		CWPLAZA008	BAGELMAN SINK 2	Α	Υ	2		
		CWPLAZA009	JOY HALLMARK BATH	Α	Υ	2		Υ
		CWPLAZA010	CVS CUSTODIAL SINK	1	Υ	2		
		CWPLAZA011	TJ MAXX CUST SINK	1	Υ	2		
		CWPLAZA012	MICHAELS KITCHENETTE	Α	Υ	2		
		CWPLAZA013	MICHAELS CLASS SINK	Α	Υ	2		Υ
		CWPLAZA014	RAY & FLAN LADIES RM	Α	Υ	2	Υ	
		CWPLAZA015	RAY & FLAN MENS RM	Α	Υ	2		
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10804	WELL #1	2	WELL #1	Α				
10805	WELL #2	2	WELL #2	Α				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source		
CT0189483 CANDLEWOOD LAKE SHOPPING PLAZA					NTNC	25	Р	GW		
Local Address (where applicable)		Service	Residentia		Commerci	al Industri	al Combine	ed Agricultural		
14 CANDLEWOOD LAKE LANE		Connections			11					

Connecticut Department of Public Health Drinking Water Section

	Water System Facility and Sampling Point Inventory										
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		Stage DBPR		
10808	WELL #5	2	WELL #5	Α							
52779	ATMOSPHERIC STORAGE										
52787	PRESSURE STORAGE										
947	WATER TREATMENT										

Water System Facility: WATE	R TREATMENT (WSF ID: 947)		
Facility Classification: CLASS 1 TR	EATMENT PLANT		Certification
Operator Name	Operator Type	Certification(s)	Expiration
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020

**Certified Operator Information** 

				Contact Inf	ormation						
Name				Organization	Organization				Job Title		
Mr. Neil Rube				R&F Danbur	y, LLC		Vice President				
Mailing Address Line One Mailing Addr			ddress Line Two	1	City		State	Zip Code			
7248 Morgan Road						Liverpoo	ol	NY	13088		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address					
315-453-2500		315-453-	2570								
Contact Role(s): Le	egal Contact (	)wner	,		<u> </u>						

Contact Role(s):	egal Contact, 0	Owner							
Name				Organization	า	Job Title			
Mr. Carl Tedeschi				Raymour &	Flanigan		Directorof Property		
Mailing Address Line One Mailing Add			lress Line Two		City State 2			Zip Code	
7248 Morgan Rd					Liverpoo	ol	NY	13088	
Business Phone	Extension	Fax	M	lobile Phone	Emergency Phone	Email Address			
315-453-2553		315-461-	3677			ctedesch	ni@raymou	rflanigan.com	
Contact Dolo(s).		Contact							

Contact Role(s): Administrative Contact

#### Please note the following:

Towns Served: BROOKFIELD

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189493	COUNTRY KIDS PLAY FARM				NTNC	167	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
107 OLD STATE ROAD		Connections	1					

Towns Served: BROOKFIELD	_		
	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	<u> </u>		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		, , , , , , , , , , , , , , , , , , ,
, , , , , , , , , , , , , , , , , , ,	1/1/20 - 12/31/28		
Total Coliform (3100)	,,,,,,	1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
, , , ,	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		·
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	·
·	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
·	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		·
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		•
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut De	epartment of	Public H	lealth	Drinki	ng W	ater S	Section		
	Water 0	uality Monit	oring an	d Com	plianc	e Sch	edule			
PWS ID	PWS Name	<u> </u>	- 0 -		Classificati				rimary Source	
CT0189493	COUNTRY KIDS PLAY FA	<b>IRM</b>			NTNC		L67	P	GW	
Local Addre	ess (where applicable)		Service	Resident	ial Comm	ercial I	ndustrial	Combined	Agricultural	
107 OLD ST	ATE ROAD		Connections	1						
Towns Serv	ved: BROOKFIELD					ı				
		Monito	oring Requ	iiremer	nts					
Water Sys	tem Facility: ENTRY POIN	T (WSF ID: 00700)								
Pesticides	s, Herbicides and PCBs-Pha	se V (SOC5)					1 routi	ne (RT) per	three years	
Sampl	ling Point (Sampling Point ID)			Monitorin	g Period	Collect	tion Perio	d Compli	ance Status	
ENTRY	POINT (3)			1/1/17 - 1	.2/31/19					
				1/1/20 - 1	2/31/22					
Organic C	Chemicals (VOCS)						1 r	outine (RT)	per quarter	
Sampl	ling Point (Sampling Point ID)			Monitorin	g Period	Collect	tion Perio	d Compli	ance Status	
ENTRY	POINT (3)			10/1/18 -	12/31/18			Co	mplete	
			1/1/19 - 3	3/31/19			Co	mplete		
				4/1/19 - 6/30/19						
				7/1/19 - 9	9/30/19					
		Other Co	ompliance	Sched	ules					
Compliance	e Schedule Activity			D	ue Date		Achieve	ed Date		
CROSS CON	INECTION SURVEY REPORT			3	/1/2024					
		Public Not	ification R	equire	ments					
		C	ompliance	Notice	Publi	c Notific	ation	PN Cert	ification	
Violation/S	Situation		Period	Tier	Requir	ed Pe	rformed	Due to DPH Received		
Chloride M	CL Violation	1/1/	/19 - 3/31/19	2	5/9/20	19		5/19/2019		
	Wate	er System Facili	ty and Sar	npling	Point In	vento	ry			
Water						Total	Lead a	nd		
•	Water System Facility	Sampling Point		nt		Coliform			Stage	
Facility ID		ID	Description		Status	Rule	Rule Ti	er Asbestos	WQP 2 DBPF	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ				
		DOWNSTREAM			Α					
		KIDFARM001	STAFF BATHR	ООМ	Α	Υ	N	Υ		
		KIDFARM002	ROOM #2		Α	Υ	N			
		KIDFARM003	BOYS ROOM		Α	Υ	N			
	KIDFARM004 UPSATIRS SII			K	Α	Υ	N			
		KIDFARM005	ROOM #3		Α	Υ	N			
		UPSTREAM	WITHIN 5 SER	RVICE CON	Α					
00700 I	ENTRY POINT	3	ENTRY POINT		Α					
10110	WELL	2	WELL		Α					

## Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTE	M		Certification
Operator Name	Operator Type	Certification(s)	Expiration
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2020

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	Water Quality Monitoring and Compliance Schedule										
PWS ID PWS Name				Clas	ssification	Population	Owner Type	Primary Source			
CT0189493	COUNTRY KIDS PLAY FARM				NTNC	167	Р	GW			
Local Address (w	Service	Residen	dential Commerc		al Industri	al Combine	ed Agricultural				
107 OLD STATE I	Connections	1									

Connecticut Department of Public Health Drinking Water Section

Towns Served: BROOKFIELD

			Certifie	d Operate	or Information					
Water System Fac	cility: DISTR	IBUTION SY	STEM (WS	F ID: 00600)						
Facility Classification Operator Name	on: SMALL WA	TER SYSTEM	Operator T	уре	Certification(s)		Certification Expiration			
-			-		DISTRIBUTION SYST	EM OPER	RATOR - CLASS I	l	6/30/2020	
			Co	ontact Info	ormation					
Name				Organization				Job Title		
Ms. Camille Sage				Country Kids	Play Farm		DPERATOR - CLASS II 6/3  Job Title Administrator City State Zip 0 Okfield CT 066 il Address 8888@aol.com  Job Title  City State Zip 0 Okfield CT 066			
Mailing Address Line One			Mailing Addr	ess Line Two			City	State	Zip Code	
107 Old State Rd	Rd					Brookfie	ld	СТ	06804	
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress			
203-775-2126		203-740-1	L551			ckpf8888@aol.com				
Contact Role(s): A	dministrative	Contact, Leg	al Contact, O	wner						
Name				Organization				Job Title		
Camille										
Mailing Address Lin	e One		Mailing Addr	ess Line Two		City State			Zip Code	
Att Camille			107 Old State	e Rd		Brookfie	ld	СТ	06804	
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress			
Contact Role(s): Le	egal Contact. O	Owner								
Name	<b>0</b>			Organization				Job Title		
Whisconier View In	ıc									
			Mailing Addr	ess Line Two			City	State	Zip Code	
107 State Road					Brookfie	ld	СТ	06804		
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	dress			
Contact Role(s): Le	egal Contact, C	Owner								

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189513	PRINCE OF PEACE LUTHERAN CHURCH				NTNC	58	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
119 JUNCTION ROAD		Connections	1					

Towns Served: BROOKFIELD			1
Monitorir	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189513	PRINCE OF PEACE LUTHERAN CHURCH				NTNC	58	Р	GW
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
119 JUNCTION F	ROAD	Connections	1					

Towns Served: BROOKFIELD

Monitoring Requirements										
Water System Facility: ENTRY POINT (WSF ID: 00700)										
Pesticides, Herbicides and PCBs-Phase V (SOC5)	s, Herbicides and PCBs-Phase V (SOC5) 1 routine (RT) per t									
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status							
	1/1/20 - 12/31/22									
Organic Chemicals (VOCS)		1 rc	outine (RT) per year							
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>							
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete							
	1/1/19 - 12/31/19		Complete							
	1/1/20 - 12/31/20									

## **Other Compliance Schedules**

Compliance Schedule Activity	Due Date	Achieved Date	
CROSS CONNECTION EXEMPTION	3/1/2021		

CROSS CONNECTION EXEMPTION 3/1/2021									
	Wat	ter System Facili	ity and Sampling Po	oint Ir	ventor	У			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ				
		Α	GREEN LOUNGE	Α	Υ	1	Υ	Υ	
		В	LADIES ROOM -SCHOOL	Α	Υ		Υ	Υ	
		B - LADIES	GENERATED BY BATCH	Α	Υ				
		С	LADIES ROOM - CHURCH	Α	Υ	1	Υ	Υ	
		C - LADIES	GENERATED BY BATCH	Α	Υ				
		D	KITCHEN SINK	Α	Υ	2	Υ	Υ	
		D - KITCHEN	GENERATED BY BATCH	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		E	MENS ROOM - SCHOOL	Α	Υ	2			
		F	CLASSROOM 1	Α	Υ		Υ	Υ	
		G	GIRLS ROOM - SCHOOL	Α	Υ		Υ	Υ	
		Н	BOYS ROOM - SCHOOL	Α	Υ	2	Υ	Υ	
		H - BOYS RO	GENERATED BY BATCH	Α	Υ				
		1	CLASSROOM 2	Α	Υ		Υ	Υ	
		J	CLASSROOM 3	Α	Υ		Υ	Υ	
		K	CLASSROOM 4	Α	Υ		Υ	Υ	
		K - CLASSRO	GENERATED BY BATCH	Α	Υ				
		L	CLASSROOM 5	Α	Υ		Υ	Υ	
		М	SACRISTY	Α	Υ		Υ	Υ	
		N	FRONT OFFICE	Α	Υ		Υ	Υ	
		Р	MENS ROOM - CHURCH	Α	Υ		Υ	Υ	
		Q	LADIES ROOM - LOWER	Α	Υ		Υ	Υ	
		R	MENS ROOM - LOWER	Α	Υ		Υ	Υ	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Water Quality Monitoring and Compliance Schedule										
PWS ID PWS Name				Cla	ssification	Population	Owner Type	Primary Source			
CT0189513	PRINCE OF PEACE LUTHERAN CHURCH				NTNC	58	Р	GW			
Local Address (w	Service	Resider	ntial Commerc		al Industri	al Combine	ed Agricultural				
119 JUNCTION R	Connections	1									

Connecticut Department of Public Health Drinking Water Section

TOWNS SCIVEG. BIGORITEED								
Water System Facility and Sampling Point Inventory								
Water			Total	Lead and				
System Water System Facility	Sampling Point	Sampling Point	Coliform	Copper		Stage		
Facility ID	ID	Description	Status Rule	Rule Tier	Asbestos	WQP 2 DBPR		
	UPSTREAM	WITHIN 5 SERVICE CON	Α					

#### 00700 **ENTRY POINT ENTRY POINT** Α 2 WELL 10111 WELL Α

## **Certified Operator Information**

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTE	M		Certification
Operator Name	Operator Type	Certification(s)	Expiration
HURLBUT, PAUL	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019

				Contact Inf	ormation				
Name				Organization				Job Title	
Ms. Debra A. Nobe	s						Director		
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code
PO Box 5184			Route 1	33		Brookfie	ld	СТ	06804
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress		
203-775-0140		203-775-9	9573						
Contact Role(s): A	dministrative	Contact, Leg	al Conta	ct					
Name				Organization				Job Title	
Prince of Peace Lut	heran Church								
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code
119 Junction Rd, P. O. Box 5184				Brookfie	ld	СТ	06804		
Business Phone Extension Fax		Mobile Phone	Emergency Phone	Email Ad	ldress				

Contact Role(s): Legal Contact, Owner

#### Please note the following:

Towns Served: BROOKFIELD

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0189563	LANDMARK OFFICE CONDO ASSOCIATION				NTNC	35	Р	GW
Local Address (w	here applicable)	Service	Residen	tial	Commerci	al Industri	al Combine	ed Agricultural
2 OLD NEW MILI	FORD ROAD	Connections	1					

Sampling Point (Sampling Point ID)

Towns Served: BROOKFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Chloride (1017)		1 rout	ine (RT) per quarter
		6 11 .: 5	0 !! 6!

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

**Monitoring Period** 

**Collection Period** 

**Compliance Status** 

Connecticut Department of Public Health Drinking Water Section	n
Water Quality Monitoring and Compliance Schedule	

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189563 LANDMARK OFFICE CONDO ASSOCIATION				NTNC	35	Р	GW	
Local Address (v	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural	
2 OLD NEW MIL	FORD ROAD	Connections	1					

Monitoring	Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19	_	Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Other Compl	iance Schedules		
Compliance Schedule Activity	Due Date	Achieved D	ate

Compliance Schedule Activity	Due Date	Achieved Date
CDOCC CONNECTION CURVEY DEDOCT	2/1/2020	

CROSS CONNECTION SURVEY REPORT 3/1/2020

Public Notification Requirements								
	Compliance Notice <u>Public Notification</u> <u>F</u>				PN Certi	<u>fication</u>		
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received		
Chloride MCL Violation	10/1/18 - 12/31/18	2	3/23/2019	3/1/2019	4/2/2019	3/1/2019		
Chloride MCL Violation	1/1/19 - 3/31/19	2	5/9/2019		5/19/2019			

## **Water System Facility and Sampling Point Inventory**

Water				Total	Lead and	
System	Water System Facility	Sampling Point	Sampling Point	Coliforn	n Copper	Stage
Facility ID		ID	Description	Status Rule	Rule Tier	Asbestos WQP 2 DBPR
MOTE, This is	formertion has been arraided to be	de accessors and analystans of	mulalia unatan anatama		.:	itus magaitaning nagusinamanta

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PWS ID	PWS Name				Classification	on Po	opulation	Owner Type	Primary Source
CT018956	63 LANDMARK OFFICE CO	NDO ASSOCIATION			NTNC		35	Р	GW
Local Add	dress (where applicable)		Service	Resident	ial Comm	ercial	Industri	al Combine	d Agricultura
2 OLD NE	W MILFORD ROAD		Connections	1					
Towns Se	erved: BROOKFIELD				,			<u> </u>	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	A	Υ		-	•
00000	DISTRIBUTION STOTEM	DOWNSTREAM							
		FIRST FLOOR	GENERATED E	ВҮ ВАТСН	Α	Υ			
		SUITE 1C -	GENERATED E	BY BATCH	Α	Υ			
		SUITE 2A -	GENERATED E	BY BATCH	Α	Υ			
		SUITE 2C -	GENERATED E	BY BATCH	Α	Υ			
		SUITE 3A -	GENERATED E	BY BATCH	Α	Υ			
		UPSTREAM	WITHIN 5 SER	VICE CON	I A				
00700	ENTRY POINT	3	ENTRY POINT		Α				
10113	WELL	2	WELL		Α				

Connecticut Department of Public Health Drinking Water Section

## **Certified Operator Information**

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATE	R SYSTEM		Certification					
Operator Name	Operator Type	Certification(s)	Expiration					
HURLBUT, ANDREW	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020					

Contact Information									
Name			Organization			Job Title			
Mr. Craig L. Froehlich			Cff Realty, LLC			Owner			
Mailing Address Line One Mailing Addr			ess Line Two		City	State	Zip Code		
14 Aragon Circle						Brookfie	ld	СТ	06804
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Address			
203-775-2500						Froballs	@aol.com		

Contact Role(s): Administrative Contact, Legal Contact, Owner

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

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Schedule Generation Date: 4/11/2019

## Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0180104 BROOKFIELD COMMONS				NTNC	125	Р	GW	
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
246 FEDERAL RO	DAD	Connections			2			

Monitoring Red	•			
	quirements			
Water System Facility: <b>DISTRIBUTION SYSTEM (WSF ID: 00600)</b>				
Chlorine Residual (0999)		1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status	
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete	
	1/1/19 - 3/31/19		Complete	
Asbestos (1094)		1 routine	(RT) per nine years	
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status	
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete	
	1/1/20 - 12/31/28			
Total Haloacetic Acids (2456)		1 rc	outine (RT) per year	
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status	
BROOKFIELD VISION CARE (BROOKBC006)	1/1/18 - 12/31/18	8/1-8/31	Complete	
	1/1/19 - 12/31/19	8/1-8/31		
	1/1/20 - 12/31/20	8/1-8/31		
Total Trihalomethanes (2950)		1 rc	outine (RT) per year	
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status	
MILLENIUM TRAVEL (BROOKBC004)	1/1/18 - 12/31/18	8/1-8/31	Complete	
	1/1/19 - 12/31/19	8/1-8/31		
	1/1/20 - 12/31/20	8/1-8/31		
Total Coliform (3100)		1 rout	ine (RT) per quarter	
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status	
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete	
	1/1/19 - 3/31/19		Complete	
	4/1/19 - 6/30/19			
	7/1/19 - 9/30/19			
Lead And Copper (PBCU)		5 routine	(RT) per three years	
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status	
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete	
	1/1/19 - 12/31/21	6/1-9/30		
	1/1/22 - 12/31/24	6/1-9/30		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter	
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status	
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete	
	1/1/19 - 3/31/19		Complete	
	4/1/19 - 6/30/19			
	7/1/19 - 9/30/19			
Water System Facility: ENTRY POINT (WSF ID: 00700)				
Chloride (1017)		1 rout	ine (RT) per quarter	
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	Collection Period	Compliance Status	
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete	
	1/1/19 - 3/31/19		Complete	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0180104 BROOKFIELD COMMONS				NTNC	125	Р	GW	
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
246 FEDERAL RO	DAD	Connections			2			

Towns Served: BROOKFIELD			
Monitoring	Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: WELL B/C (WSF ID: 10861)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
WELL B/C (2)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: WELL D (WSF ID: 10862)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
WELL D (2)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0180104 BROOKFIELD COMMONS					NTNC	125	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
246 FEDERAL RO	DAD	Connections			2			

## **Monitoring Requirements**

Water System Facility: WELL D (WSF ID: 10862)

E. Coli (3014) 1 routine (RT) per quarter

Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status

7/1/19 - 9/30/19

## Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System	Facility	ENTRY POINT	(WSFID: 00700)
vvaler System	I Facility.	CIVITAL POINT	(11/2011)

, , , , , , , , , , , , , , , , , , , ,	,			
Analyte	Monitoring Requirement (Summary Type) Operating Lin		t	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: .2 N	/IG/L	Daily
Start Date: 10/1/2010	Compliance	e History:	<b>Operating Limit</b>	Monitoring
	Monitoring	Period	Compliance Status	: Compliance Status:
	11/1/2018 -	11/30/2018		N
	12/1/2018 -	12/31/2018		N
	1/1/2019 - 1	1/31/2019		N
	2/1/2019 - 2	2/28/2019		N
	3/1/2019 - 3	3/31/2019		
	4/1/2019 - 4	1/30/2019		

## **Other Compliance Schedules**

Compliance Schedule Activity

Due Date

Achieved Date

CROSS CONNECTION SURVEY REPORT 3/1/2020

Public Notification Requirements										
Compliance Notice <u>Public Notification</u> <u>PN Certification</u>										
Violation/Situation	Period Tier Required Performed Due to DPH I									
Organic Chemicals M&R Violation	4/1/18 - 6/30/18	3	8/31/2019	1/29/2019	9/10/2019	1/29/2019				
Chloride M&R Violation 4/1/18 - 6/30/18 3 8/31/2019 1/29/2019 9/10/2019 1/29/2019										

	W	ater System Facili	ity and Sampling P	oint Ir	ventor	<b>Y</b>		
Water System Facility IE	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Υ			
		BROOKBC001	HEALTHSOUTH	Α	Υ	2		
		BROOKBC002	ACCURATE OFICE MACH	Α		2		
		BROOKBC003	OUT TAP NR GEROSA	Α	Υ	2		
		BROOKBC004	MILLENIUM TRAVEL	Α		2		Υ
		BROOKBC005	DR PARAVATIS OFFICE	Α		2		
		BROOKBC006	BROOKFIELD VISION CA	Α				Υ
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10861	WELL B/C	2	WELL B/C	Α				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Water Quality Monitoring and Compliance Schedule									
PWS ID	WS ID PWS Name					Populatio	n O	wner Type	Primary Soul	rce
CT0180104	CT0180104 BROOKFIELD COMMONS				NTNC	125		Р	GW	
Local Address (v	ocal Address (where applicable) Service Resid				Commerci	al Indust	rial	Combine	d Agricultu	ral
246 FEDERAL RI	46 FEDERAL ROAD Connections				2					

Connecticut Department of Public Health Drinking Water Section

Towns Served: BROOKFIELD

**Operator Name** 

	Water System Facility and Sampling Point Inventory											
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		Stage 2 DBPR			
10862	WELL D	2	WELL D	Α								
1098	CHLORINATION TREATMENT											
47612	ATMOSPHERIC STORAGE											
47614	PRESSURE STORAGE											
59403	BLADDER TANK (BUILDING D)											

#### Water System Facility: CHLORINATION TREATMENT (WSF ID: 1098) Facility Classification: CLASS 1 TREATMENT PLANT Certification Certification(s) **Operator Type Expiration**

HURLBUT, ANDREW **CHIEF OPERATOR** WATER TREATMENT PLANT OPERATOR - CLASS II 6/30/2020

**Certified Operator Information** 

<u>'</u>									
				Contact Inf	ormation				
Name				Organization				Job Title	
Ms. Peg Routhier				Rei Property	Management		Vp, Associa	tion Mgr.	
Mailing Address Lin	e One		Mailing A	Address Line Two			City	State	Zip Code
2A Ives Street						Danbury	,	СТ	06810
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress		
203-744-8400	138	203-744-	2758	203-948-1785		prouthie	r@rei-pm.n	et	
Contact Role(s): A	dministrative	Contact	·						
Name				Organization				Job Title	
Brookfield Commo	ns Association	n Inc							
Mailing Address Lin	e One		Mailing A	Address Line Two			City	State	Zip Code
246A Federal Road						Brookfie	ld	СТ	06804
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress		
203-885-7460									

Contact Role(s): Legal Contact, Owner

### Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

## Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0180384	GREEN TREE TOYOTA				NTNC	55	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
45 COMMERCE	ROAD	Connections			1			

Towns Served: BROOKFIELD			
Monitoring F	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	0)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	4/1/19 - 6/30/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Schedule Generation Date: 4/11/2019

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule										
PWS ID PWS Name Classification Population Owner Type Primary Source										
CT0180384	GREEN TREE TOYOTA				NTNC	55	Р		GW	
Local Address (	where applicable)	Service	Residen	tial	Commerci	al Industri	al Combi	ned	Agricultural	
45 COMMERCE ROAD Connections 1										
Towns Served: BROOKFIELD										

Towns Served: BROOKFIELD			
Monitoring	g Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 3/31/19	1/1-3/31	Complete
	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Other Comp	liance Schedules		
Compliance Schedule Activity	Due Date	Achieved D	Pate
CROSS CONNECTION SURVEY REPORT	3/1/2020		
Water System Facility a	nd Sampling Point In	ventory	

Water System	Water System Facility		Sampling Point		Total Coliform	Lead and Copper			Stage
Facility ID	)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP	2 DBPF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		GTT001	MENS BATHROOM 1ST FL	Р	Υ	3			
		GTT002	LADIES RM 1ST FL	Р	Υ	3			
		GTT003	UPSTAIRS LADIES RM	Р	Υ	3			

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	Water Quality Monitoring and Compliance Schedule									
PWS ID	VS ID PWS Name					Population	Owner Type	Primary Source		
CT0180384	CT0180384 GREEN TREE TOYOTA				NTNC	55	Р	GW		
Local Address (v	ocal Address (where applicable) Service Reside				Commercia	al Industri	al Combine	ed Agricultural		
5 COMMERCE ROAD Connections					1					

Connecticut Department of Public Health Drinking Water Section

Wat	Water System Facility and Sampling Point Inventory											
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR					
	GTT004	UPSTAIRS MENS RM	Р	Υ	3							
	GTT005	SHOP SINK	Р	Υ	3							
	UPSTREAM	WITHIN 5 SERVICE CON	Α									
00700 ENTRY POINT	3	ENTRY POINT	Α									
10066 WELL1	2	WELL1	Α									

	Certified Oper	ator information		
Water System Facility: DIST	TRIBUTION SYSTEM (WSF ID: 0060	00)		
Facility Classification: SMALL \	VATER SYSTEM			Certification
Operator Name	Operator Type	Certification(s)		Expiration
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT	OPERATOR - CLASS II	3/31/2020
	Contact I	nformation		
Name	Organizat	tion	Job Title	9
Mr. Harald Tananhaum			Ourser	

				- 0-								
Mr. Harold Tananb	Mr. Harold Tananbaum				Owner							
Mailing Address Line One Mailing Ad			Mailing Addr	ess Line Two			City	State	Zip Code			
21 Baldwin Farm Rd.						Greenwic	:h	СТ	06830			
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	ne Email Address						
203-775-6221												
Contact Polo(s): Lo	agal Contact Ov	wor										

Contact Role(s): Legal Contact, Owner

Name				Organization	l	Job Title			
Mr. John Blank				Greentree To	oyota				
Mailing Address Lin		Mailing Add	Mailing Address Line Two			City	State	Zip Code	
45 Commerce Drive	45 Commerce Drive				Brookfie	ld	СТ	06776	
Business Phone	Extension	Fax	N	1obile Phone	Emergency Phone	Email Ad	dress		
203-775-6221									

Contact Role(s): Administrative Contact

#### Please note the following:

Towns Served: BROOKFIELD

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C				Cla	ssification	Population	Owner Type	Primary Source
CT0180694 MCMULLIN MANUFACTURING CORPORATION					NTNC	33	Р	GW
Local Address (v	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural	
70 POCONO ROAD		Connections			1			

Towns Served: BROOKFIELD			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		<b>1</b> re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Schedule Generation Date: 4/11/2019

	Connecticut Department of Public Health	Drinking	g Water	Section					
	Water Quality Monitoring and Compliance Schedule								
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source				
CT0180694	MCMULLIN MANUFACTURING CORPORATION	NTNC	33	Р	GW				

CI0180094 WICHOLLIN WANDFACTORING CORPORATION					INTINC		33		г	G	VV	
Lo	ocal Address (w	here applicable)	Service	Residen	ntial	Commercia	al	Industria	al	Combined	Agri	icultural
70	POCONO ROA	AD.	Connections			1						

Monitoring Requirements									
Water System Facility: ENTRY POINT (WSF ID: 00700)									
Organic Chemicals (VOCS)	1 routine (RT) per year								
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status						
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete						

1/1/19 - 12/31/19

1/1/20 - 12/31/20

Complete

## **Other Compliance Schedules**

CROSS CONNECTION EXEMPTION 3/1/2021

			5,	-,					
	Wat	er System Facili	ty and Sampling P	oint Ir	nvento	Т			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		TT001	LADIES ROOM 1ST FLR	Α	Υ	2	Υ	Υ	
		TT002	MENS ROOM 1ST FLR	Α	Υ	2	Υ	Υ	
		TT003	CAFETERIA 1ST FLR	Α	Υ	2	Υ	Υ	
		TT004	LADIES ROOM 2ND FLR	Α	Υ	2	Υ	Υ	
		TT005	MENS ROOM 2ND FLR	Α	Υ	2	Υ	Υ	
		TT006	CAFETERIA 2ND FLR	Α	Υ	2	Υ	Υ	
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10988	WELL	2	WELL	Α					
57388	UV TREATMENT STATION								
57390	PRESSURE STORAGE								

## **Certified Operator Information**

Water System Facility: UV TREATMENT STATION (WSF ID: 57388)

 Facility Classification:
 CLASS 1 TREATMENT PLANT
 Certification

 Operator Name
 Operator Type
 Certification(s)
 Expiration

 HURLBUT, ANDREW
 CHIEF OPERATOR
 WATER TREATMENT PLANT OPERATOR - CLASS II
 6/30/2020

HURLBUT, ANDREW	/		CHIEF OPER	RATOR	TOR WATER TREATMENT PLANT OPERATOR - CLASS II					
			C	Contact Inf	ormation					
Name				Organization	า	Job Title				
Mr. Ted R. Anson				McMullin M	McMullin Manufacturing Corp Dir Risk Mangt			ngt		
Mailing Address Line One Mailing Add				dress Line Two	ess Line Two			State	Zip Code	
P.O. Box 780						Brookfield CT 06804			06804	
Business Phone	Extension	Fax	N	1obile Phone	Emergency Phone	Email Address				
203-740-3366		203-775-	7953		203-733-0200	tanson@mcmullinmfg.com				
Contact Role(s): A	dministrative	Contact, Leg	al Contact,	Owner						

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

The state of the s										
PWS ID PWS Name					Population	Owner Type	<b>Primary Source</b>			
CT0180694	180694 MCMULLIN MANUFACTURING CORPORATION					Р	GW			
Local Address (v	vhere applicable)	Service	Resider	ntial Commerci	al Industri	al Combine	ed Agricultural			
70 POCONO RO	AD	Connections								
T	DOOKELELD									

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name Cla				ssification	Population	Owner Type	Primary Source	
CT0180914	ELMBROOK PLAZA				NTNC	30	Р	GW
Local Address (where applicable)		Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
632-640 FEDERAL RD		Connections			1			

Towns Served: BROOKFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 000	500)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/24		Complete
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	S ID PWS Name Class					Population	Owner Type	Primary Source
CT0180914	ELMBROOK PLAZA				NTNC	30	Р	GW
Local Address (where applicable)		Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
632-640 FEDERAL RD		Connections			1			

Towns Served: BROOKFIELD

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2014								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2017								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2018								
CROSS CONNECTION SURVEY REPORT	3/1/2020								

	Wat	er System Facili	ty and Sampling P	oint Ir	ventor	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	А	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		EP001	PULCINELLA M REST RM	Α	Υ	2	Υ	
		EP002	PULCINELLA L REST RM	Α	Υ	2	Υ	
		EP003	PULCINELLA BAR SINK	Α	Υ	2	Υ	
		EP004	PULCINELLA BAR H SIN	Α	Υ	2	Υ	
		EP005	PULCINELLA K H SINK	Α	Υ	2	Υ	
		EP006	PULCINELLA L TRPL SI	Α	Υ	2	Υ	
		EP007	PULCINELLA K H SINK	Α	Υ	2	Υ	
		EP008	PULCINELLA K PREP SI	Α	Υ	2	Υ	
		EP009	PULCINELLA EMP H SIN	Α	Υ	2	Υ	
		EP010	PULCINELLA UTIL SINK	Α	Υ	2	Υ	
		EP011	PULCINELLA REST RM S	Α	Υ	2	Υ	
		EP012	PULCINELLA BAR SINK	Α	Υ	2	Υ	
		EP013	CREDIT WORKS RESTR	Α	Υ	2	Υ	
		EP014	PAPERBACK REST RM	Α	Υ	2	Υ	
		EP015	SCOTT LIMO REST RM	Α	Υ	2	Υ	
		EP016	KUMON REST RM	Α	Υ	2	Υ	
		EP017	AIG REST RM	Α	Υ	2	Υ	
		EP018	AIG KITHCHEN SINK	Α	Υ	2	Υ	
		EP019	2ND FLR L REST RM	Α	Υ	2	Υ	
		EP020	2ND FLR M REST RM	Α	Υ	2	Υ	
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
20383	WELL	2	WELL	Α				

## **Certified Operator Information**

Connecticut Department of Public Health	Drinking	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	e	
PWS Name	Classification	Population	Owner Type	Primai

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Pr	imary Source
CT0180914	ELMBROOK PLAZA				NTNC	30	Р		GW
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combin	ed	Agricultural
632-640 FEDER	AL RD	Connections			1				

## **Certified Operator Information**

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYST	EM		Certification
Operator Name	<b>Operator Type</b>	Certification(s)	<b>Expiration</b>
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2020

FOLEY, JAMES			CHIEF OPERA	ATOR	WATER TREATMEN	EATMENT PLANT OPERATOR - CLASS II					
			Co	ontact Inf	ormation						
Name				Organization	1			Job Title			
Mr. Daniel D. Johns	son	632-640 Federal LLC Member/Manager									
Mailing Address Lin	e One		Mailing Addr	ress Line Two			City	State	Zip Code		
260 Quarry Road			Unit A			Milford		СТ	06460		
Business Phone Extension Fax M			Mo	obile Phone	Emergency Phone Email Address			·			
		203-306-0	0229		203-915-6211	djohnso	djohnson@mjbcorp.com				

Contact Role(s): Administrative Contact, Legal Contact, Owner

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS ID PWS Name CI					Population	Owner Type	Primary Source
CT0189763	COUNTRY KIDS CLUB				NTNC	55	Р	GW
Local Address (where applicable)		Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
94 OLD STATE R	OAD	Connections			1			

Towns Served: BROOKFIELD			-
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: TREATMENT PLANT (WSF ID: 007	700)		
Chloride (1017)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Nitrate (1040)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Nitrite (1041)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Inorganic Chemicals (IOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Departn	nent of Public H	lealth	l Di	rinking	g Water	Section	
	Water Quality	Monitoring and	d Con	npl	liance S	Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
СТ0189763					NTNC	55	Р	GW
Local Address (	where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
94 OLD STATE F	ROAD	Connections			1			
Towns Served:	BROOKEIELD							

Monitoring Requirements									
Water System Facility: TREATMENT PLANT (WSF ID: 00700)									
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years						
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>						
ENTRY POINT (3)	1/1/17 - 12/31/19								
	1/1/20 - 12/31/22								
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1	(RT) per three years						
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>						
ENTRY POINT (3)	1/1/17 - 12/31/19	1/1-12/31	Waiver						
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)	e II & V (SOCS) 1 routine (RT) per three								
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>						
ENTRY POINT (3)	1/1/20 - 12/31/22								
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter						
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>						
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete						
	1/1/19 - 3/31/19		Complete						
	4/1/19 - 6/30/19								
	7/1/19 - 9/30/19								
Other Comp	Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved D	ate						
CROSS CONNECTION SURVEY REPORT	3/1/2020								

Public Notification Requirements									
	Compliance	Notice	<u>Public No</u>	<u>tification</u>	PN Certification				
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received			
Chloride MCL Violation	1/1/19 - 3/31/19	2	5/9/2019		5/19/2019				

Water System Facility and Sampling Point Inventory											
				Total	Lead and						
Water System Facility	Sampling Point	Sampling Point		Coliform	Copper		Stage				
	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBP				
BETWEEN GAC FILTERS											
	5	COMBINED RAW WATER	Α								
DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ							
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
	KIDCLUB001	KITCHEN SINK	Α	Υ	N						
	KIDCLUB002	WOMANS BATH UPSTRS	Α	Υ	N						
	KIDCLUB003	ROOM #2	Α	Υ	N						
	KIDCLUB004	MENS RM DOWNSTAIRS	Α	Υ	N						
	KIDCLUB005	DWNSTRS CLASS SINK	Α	Υ	N	Υ					
	UPSTREAM	WITHIN 5 SERVICE CON	Α								
TREATMENT PLANT	3	ENTRY POINT	Α								
	Water System Facility  BETWEEN GAC FILTERS  COMBINED RAW WATER  DISCHARGE  DISTRIBUTION SYSTEM  TREATMENT PLANT	Water System Facility  BETWEEN GAC FILTERS  COMBINED RAW WATER DISCHARGE  DISTRIBUTION SYSTEM  4  DOWNSTREAM KIDCLUB001 KIDCLUB002 KIDCLUB003 KIDCLUB004 KIDCLUB005 UPSTREAM	Water System Facility  Sampling Point ID  Description  BETWEEN GAC FILTERS  COMBINED RAW WATER DISCHARGE  DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM  DOWNSTREAM WITHIN 5 SERVICE CON KIDCLUB001 KITCHEN SINK KIDCLUB002 WOMANS BATH UPSTRS KIDCLUB003 ROOM #2 KIDCLUB004 MENS RM DOWNSTAIRS KIDCLUB005 DWNSTRS CLASS SINK UPSTREAM WITHIN 5 SERVICE CON	Water System Facility  Sampling Point Description  BETWEEN GAC FILTERS  COMBINED RAW WATER  DISCHARGE  DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM  A DOWNSTREAM WITHIN 5 SERVICE CON A KIDCLUB001 KITCHEN SINK  KIDCLUB002 WOMANS BATH UPSTRS  KIDCLUB003 ROOM #2  KIDCLUB004 MENS RM DOWNSTAIRS  KIDCLUB005 DWNSTRS CLASS SINK  UPSTREAM WITHIN 5 SERVICE CON A	Water System Facility  Sampling Point ID  Sampling Point Description  Status  BETWEEN GAC FILTERS  COMBINED RAW WATER  DISCHARGE  DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM A Y  DOWNSTREAM WITHIN 5 SERVICE CON A  KIDCLUB001 KITCHEN SINK A Y  KIDCLUB002 WOMANS BATH UPSTRS A Y  KIDCLUB003 ROOM #2 A Y  KIDCLUB004 MENS RM DOWNSTAIRS A Y  KIDCLUB005 DWNSTRS CLASS SINK A Y  UPSTREAM WITHIN 5 SERVICE CON A	Water System Facility  Sampling Point ID  Sampling Point Description  Status  Total Coliform Rule Tier  Status  Copper Rule Tier  Status  Elead and Coliform Rule Tier  Status  Combined Raw Water  Somblined Raw Water A  DISCHARGE  DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM A Y  DOWNSTREAM WITHIN 5 SERVICE CON A  KIDCLUB001 KITCHEN SINK A Y N  KIDCLUB002 WOMANS BATH UPSTRS A Y N  KIDCLUB003 ROOM #2 A Y N  KIDCLUB004 MENS RM DOWNSTAIRS A Y N  KIDCLUB005 DWNSTRS CLASS SINK A Y N  KIDCLUB005 DWNSTRS CLASS SINK A Y N  UPSTREAM WITHIN 5 SERVICE CON A	Water System Facility  Sampling Point ID  Sampling Point Description  Status  Coliform Copper Rule Tier Asbestos  BETWEEN GAC FILTERS  COMBINED RAW WATER 5 COMBINED RAW WATER A DISCHARGE  DISTRIBUTION SYSTEM  4 DISTRIBUTION SYSTEM A Y  DOWNSTREAM WITHIN 5 SERVICE CON A  KIDCLUB001 KITCHEN SINK A Y N  KIDCLUB002 WOMANS BATH UPSTRS A Y N  KIDCLUB003 ROOM #2 A Y N  KIDCLUB004 MENS RM DOWNSTAIRS A Y N  KIDCLUB005 DWNSTRS CLASS SINK A Y N  UPSTREAM WITHIN 5 SERVICE CON A				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
CT0189763 COUNTRY KIDS CLUB					NTNC	55	Р	GW			
Local Address	Address (where applicable) Service Residential Comm		Commerci	al Industri	al Combine	ed Agricultural					
94 OLD STATE ROAD Connections					1						

Connecticut Department of Public Health Drinking Water Section

Towns Served: BROOKFIELD

	Water System Facility and Sampling Point Inventory										
Water System Facility IL	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		stage DBPR		
10120	WELL #1	2	COUNTRY KID'S CLUB	Α							
10837	WELL #2	2	WELL #2	Α							
52004	PRESSURE STORAGE										

**Certified Operator Information** 

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)											
Facility Classification: SMALL WA	TER SYSTEM			Certification							
Operator Name	Operator Type	Certification(s)		Expiration							
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT	OPERATOR - CLASS II	6/30/2020							
		DISTRIBUTION SYSTEM OPER	RATOR - CLASS II	6/30/2020							
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT	OPERATOR - CLASS I	6/30/2020							
		DISTRIBUTION SYSTEM OPER	RATOR - CLASS II	6/30/2020							
Contact Information											
Name	Organizatio	n	Job Titl	e							

Mailing Address Lin	e One		Mailing Add	lress Line Two		City		State	Zip Code
107 Old State Rd						Brookfield		СТ	06804
Business Phone	Extension	Fax	IV	lobile Phone	Emergency Phone	Email Addr	ess		
203-775-2126		203-740-3	1551			ckpf8888@aol.com			
Contact Role(s): A	dministrative	Contact	,						
Name				Organization	l			Job Title	
Ms. Rosanne Keller	•			Kids View LL	С	Pr	esident		
Mailing Address Lin	e One		Mailing Add	lress Line Two		(	City	State	Zip Code
8 Sulky Drive						Brookfield		СТ	06804
Business Phone	Extension	Fax	N	lobile Phone	Emergency Phone	Email Addr	ess		

Country Kids Play Farm

Contact Role(s): Legal Contact, Owner

#### Please note the following:

Ms. Camille Sage

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Administrator

## Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0189823	U. S. POST OFFICE - BROOKFIELD			NTNC	70	F	GW
Local Address (	where applicable)	Service	Resident	ial Commerc	ial Industri	al Combine	ed Agricultural
115 POCONO R	OAD	Connections		1			

Towns Served: BROOKFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Total Coliform (3100)			3 (TR) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
Lead And Copper (PBCU)		5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		
	1/1/19 - 6/30/19		Complete
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Public Health Drinking Water Section										
Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name				ssification	Population	Owner Type	Primary Source			
CT0189823	U. S. POST OFFICE - BROOKFIELD				NTNC	70	F	GW			
Local Address (w	here applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural			
115 POCONO ROAD Connections 1											
Towns Served: B	ROOKFIELD										

Towns Served: BROOKFIELD						
M	lonitoring Requ	irement	ts			
Water System Facility: ENTRY POINT (WSF ID: 0	0700)					
Inorganic Chemicals (IOCS)				1 rout	ine (RT) per	three years
Sampling Point (Sampling Point ID)	1	Monitoring	Period	Collection Perio	od Compli	ance Status
ENTRY POINT (3)		1/1/18 - 12	/31/20			
		1/1/21 - 12	/31/23			
Nitrate And Nitrite (NOX)					1 routine (F	T) per year
Sampling Point (Sampling Point ID)	1	Monitoring	Period	Collection Perio	ance Status	
ENTRY POINT (3)		1/1/18 - 12	/31/18		Co	mplete
		1/1/19 - 12	/31/19		Co	mplete
		1/1/20 - 12	/31/20			
Pesticides, Herbicides and PCBs-Phase II (SOC2)				1 rout	ine (RT) per	three years
Sampling Point (Sampling Point ID)	1	Monitoring	Period	Collection Perio	od Compli	ance Status
ENTRY POINT (3)		1/1/17 - 12	/31/19			
		1/1/20 - 12	/31/22			
Pesticides, Herbicides and PCBs-Phase V (SOC5)				1 rout	ine (RT) per	three years
Sampling Point (Sampling Point ID)	1	Monitoring Period Collection				ance Status
ENTRY POINT (3)		1/1/17 - 12	/31/19			
		1/1/20 - 12	/31/22			
Organic Chemicals (VOCS)					1 routine (F	T) per year
Sampling Point (Sampling Point ID)	I	Monitoring	Period	Collection Perio	od Compli	ance Status
ENTRY POINT (3)	1/1/18 - 12/31/18				Co	mplete
		1/1/19 - 12	/31/19		Co	mplete
		1/1/20 - 12	/31/20			
Water System Facility: WELL (WSF ID: 10945)						
E. Coli (3014)				1 tr	iggered (TG)	per period
Sampling Point (Sampling Point ID)	1	Monitoring	Period	Collection Perio	od Compli	ance Status
WELL (2)	1	0/23/18 - 1	.0/29/18_		Co	mplete
	1	0/23/18 - 1	.0/29/18		Co	mplete
	1	0/23/18 - 1	.0/29/18		Co	mplete
Oth	ner Compliance	Schedu	les			
Compliance Schedule Activity		Du	e Date	Achieve	ed Date	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE		9/2	8/2018			
CROSS CONNECTION SURVEY REPORT			1/2019			
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE			8/2019			
Public	c Notification R					
	Compliance	Notice		: Notification	PN Cer	<u>tification</u>
Violation/Situation	Period	Tier	Require			Received
Lead and Copper M&R Violation	7/1/18 - 12/31/18	3	2/22/20	20	3/3/2020	

## Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

		0						
PWS ID	PWS ID PWS Name C						Owner Type	Primary Source
CT0189823	U. S. POST OFFICE - BROOKFIELD				NTNC	70	F	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
115 POCONO I	ROAD	Connections			1			

Towns Served: BROOKFIELD

	Wa	ater System Facili	ty and Sampling P	oint Ir	vento	ſy			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Sto WQP 2 D	age OBPF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ				
		BP001	BREAK ROOM	Р	Υ	1			
		BP001 - BRE	GENERATED BY BATCH	Α	Υ				
		BP002	LADIES RM L SINK	Р	Υ	1			
		BP002 - LAD	GENERATED BY BATCH	Α	Υ				
		BP003	LADIES RM R SINK	Р	Υ	1			
		BP003 - LAD	GENERATED BY BATCH	Α	Υ				
		BP004	MENS RM SINK 1	Р	Υ	1			
		BP004 - MEN	GENERATED BY BATCH	Α	Υ				
		BP005	MENS RM SINK 2	Р	Υ	1			
		BP005 - MEN	GENERATED BY BATCH	Α	Υ				
		BP006	MENS RM SINK 3	Р	Υ	1			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
10945	WELL	2	WELL	Α					
51811	PRESSURE STORAGE								

## **Certified Operator Information**

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM	Л		Certification
Operator Name	Operator Type	Certification(s)	<b>Expiration</b>
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2020

FOLEY, JAMES			CHIEF OPE	RATOR	WATER TREATMEN	LASS II	3/31/2020		
				Contact Inf	formation				
Name				Organizatio	n		Job Title		
Mr. Greg Holotko				Us Postal Se	rvice	Postmaster			
Mailing Address Lin	e One		Mailing Ad	dress Line Two	ress Line Two			State	Zip Code
115 Pocono Road						Brookfie	eld	СТ	06804-9888
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
203-775-2717		203-775-	5252			Gregory			
0					*				

Contact Role(s): Administrative Contact, Legal Contact

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	<u> </u>							
PWS ID PWS Name C					ssification	Population	Owner Type	Primary Source
CT0189873	GREENFIELD GLOBAL USA INC				NTNC	33	Р	GW
Local Address (where applicable)		Service	Residentia		Commerci	al Industri	al Combine	ed Agricultural
58 VALE ROAD		Connections			1			

Towns Served: BROOKFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/24		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 11/30/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Total Coliform (3100)			3 (TR) per month
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	12/1/18 - 12/31/18		Complete
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		·
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
• •	1/1/21 - 12/31/23		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	_							
	Connecticut Depa	artment of	Public Health I	Drinl	king Wa	ater Se	ction	
	Water Qua	ality Monit	oring and Comp	plian	ce Sch	edule		
PWS ID	PWS Name						ner Type P	rimary Sourc
CT0189873	GREENFIELD GLOBAL USA II	NC		NTN	С 3	33	Р	GW
Local Addres	s (where applicable)		Service Residentia	al Com	mercial Ir	ndustrial	Combined	Agricultura
58 VALE ROA	.D		Connections		1			
Towns Serve	d: BROOKFIELD			·	·	·		·
		Monito	oring Requiremen	ts				
Water Syste	em Facility: ENTRY POINT (	WSF ID: 00700)						
Organic Ch	emicals (VOCS)					1 rou	tine (RT)	per quarter
Samplir	ng Point (Sampling Point ID)		Monitoring	g Period	d Collect	ion Period	Compl	iance Status
			1/1/19 - 3	/31/19			Co	mplete
			4/1/19 - 6					
			7/1/19 - 9	/30/19				
•	em Facility: <b>WELL</b>	(WSI	F ID: 53638)					
E. Coli (30	•							per period
_	ng Point (Sampling Point ID)		Monitoring			ion Period		iance Status
WELL (2	(1)		11/26/18 -		8		Co	mplete
		Other Co	ompliance Schedu	ıles				
_	Schedule Activity			ue Date		Achieved	Date	
CROSS CONN	IECTION EXEMPTION		3/	/1/2022				
	Water S	System Facili	ty and Sampling F	Point	Invento	ry		
Water					Total	Lead and		
-	ater System Facility	Sampling Point ID	Sampling Point Description		Coliform	Copper	Ashastas	Stage
Facility ID	CTDIDLITION CYCTEM		•	Statu	<sub>IS</sub> Rule	Kule Her	Aspestos	WQP 2 DBP
00600 D	STRIBUTION SYSTEM	4	GENERIC LOCATION	A	V	N.	V	V
		D001	RESTROOM 1	A	Y	N	Y	Y
		D002	RESTROOM 2	A	Y	N	Y	Y
		D003	RESTROOM 3	A	Y	N	Y Y	Y
		D004	LABORATORY SINK	A	Y	N	Ϋ́	Y Y
		DOMNISTREAM	PRODUCTION TAP	A	Y	N	Y	Y
		UPSTREAM	WITHIN 5 SERVICE CON WITHIN 5 SERVICE CON	A A				
00700 51	UTDV DOINT							
	NTRY POINT	3	ENTRY POINT	Α				
	ARMCO PRODUCTS WTP	2	WELL	Α				
	ADDER TANK 1							
54292 BI	ADDER TANK 2	0 .15						
			Operator Informa	ition				
-	em Facility: PHARMCO PROI	-	/SF ID: 53761)					
_	ification: CLASS 1 TREATMENT							Certification
Operator Na		Operator Type						Expiration
HURLBUT, PA	AUL	CHIEF OPERATO		TMENT	PLANT OPE	KATOR - CL	ASS II	12/31/2019
			tact Information					
Name			rganization				Job Title	
Mr. Drew W			reenfield Global USA Inc			Manager		
Mailing Addr	ess Line One	Mailing Address	s Line Two		C	ty	State	Zip Code
		· ·			<u> </u>			

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(	Connectic	ut Depa	rtment o	f Public	Health	Drin	king	Water	Se	ction	
	Wa	ter Qua	lity Monit	toring a	nd Com	plia	nce S	chedul	le		
PWS ID	PWS Name					Classifi	cation	Population	Owr	ner Type	Primary Source
CT0189873	GREENFIELD GL	OBAL USA IN	С			NT	NC	33		Р	GW
Local Address (wh	nere applicable)			Service	Service Residentia		ommercial Industri		rial Combined		ed Agricultura
58 VALE ROAD				Connection	ns		1				
Towns Served: BF	ROOKFIELD										
58 vaie ka					вгоокп			eia		CI	06804
<b>Business Phone</b>	Extension	Fax	Mob	Mobile Phone Emergency			Email A	ddress			
203-740-5030							drew.wagner@greenfield.com				
Contact Role(s):	Administrative	Contact, Leg	al Contact								
Name			C	Organization						Job Titl	e
Mr. Ron Kean			G	reenfield Glo	bal USA Inc			Vp And G	enera	al Counc	
Mailing Address L	ine One		Mailing Addres	ss Line Two				City		State	Zip Code
20 Toronto Stree	t						Toronto	o, Ontario			
Business Phone	Extension	Fax	Mob	Mobile Phone Emergence			Email Address				
416-304-1700	8527						ron.kea	ın@greenfi	eld.co	om	
Contact Role(s):	Owner	•	,								

#### Please note the following:

- L. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source	
СТ0189923	125 COMMERCE DRIVE				NTNC	37	Р	GW	
Local Address (\	Service	Residen	itial	Commercia	al Industria	al Combine	ed Agricultural		

1

Connections

Towns Served: BROOKFIELD			1
Monitorin	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		· · · · · · · · · · · · · · · · · · ·
	1/1/20 - 12/31/20		

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Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0189923	125 COMMERCE DRIVE				NTNC	37	Р	GW
Local Address (w	here applicable)	Service	Residen	tial	Commercia	al Industri	al Combine	ed Agricultural
		Connections			1			

Other Compliance Schedules										
Compliance Schedule Activity	Due Date	Achieved Date								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2010									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2011									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2018									
SWTS 4: PWS MONITOR AFTER SOWT INSTALL	12/31/2018	10/22/2018								
CROSS CONNECTION SURVEY REPORT	3/1/2019									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2019									
SWTS 4: PWS MONITOR AFTER SOWT INSTALL	6/30/2019									
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	9/30/2019	5/8/2018								

	Water System Facility and Sampling Point Inventory											
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Sta WQP 2 D				
00600	DISTRIBUTION SYSTEM	125COM001	1ST FLOOR LADIES	Α	Υ	1						
		125COM002	1ST FLOOR MEN	Α	Υ	1						
		125COM003	1ST FLOOR JANITOR	Α	Υ	1						
		125COM004	2ND FLOOR LADIES	Α	Υ	1						
		125COM005	2ND FLOOR MEN	Α	Υ	1						
		125COM006	2ND FLOOR JANITOR	Α	Υ	1						
		4	DISTRIBUTION	Α								
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
		UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700	ENTRY POINT	3	ENTRY POINT	Α								
54631	WELL	2	WELL	Α								
55774	PRESSURE STORAGE											

Certified	<b>Operator</b>	Inf	formation
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Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM							
Operator Name	Operator Type	Certification(s)	<b>Expiration</b>				
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2020				

FOLEY, JAMES CHIEF OPERATOR WATER TREATM					WATER TREATMEN	T PLANT	OPERATOR	- CLASS II	3/31/2020
			С	ontact Inf	ormation				
Name				Organization	ı	Job Title			
Mr. Don F. Longo				Tecor Prope	rties LLC				
Mailing Address Line One Mailing Addr			ress Line Two			City	State	Zip Code	
3 Production Drive			Unit #1			Brookfie	ld	СТ	06804
Business Phone	Extension	Fax	M	lobile Phone	Emergency Phone	Email Ad	dress		
203-938-0751		203-775-0	0624 20	03-948-2357					
Contact Role(s): A	dministrative	Contact, Leg	al Contact, (	Owner		·			

Connecticut Department of Public Health Drinking Water Section	1
Water Quality Monitoring and Compliance Schedule	

	water quarty Monitoring and Compitance Schedule								
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0189923	T0189923 125 COMMERCE DRIVE				NTNC	37	Р	GW	
Local Address (v	vhere applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural	
		Connections			1				

#### Please note the following:

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of Public Health Drinking Water Section											
	Water Quality Monitoring and Compliance Schedule											
	water Quality Monit	or mg am	u Con	ıpı	lance s	cnedui	е					
PWS ID	WS ID PWS Name				ssification	Population	Owner Type	Primary Source				
CT0189973	PHOTRONICS, INC. BUILDING 1				NTNC	110	Р	GW				
Local Address	Service	Residen	tial	Commercia	al Industri	al Combin	ed Agricultural					
15 SECOR ROAD		Connections			1							

15 SECOR ROAD

Towns Served: BROOKFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION (WSF ID: 00600)			
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

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# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name Cla						Population	Owner Type	Primary Source
CT0189973	PHOTRONICS, INC. BUILDING 1		NTNC	110	Р	GW		
Local Address (v	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural	
15 SECOR ROAD		Connections		1				

Towns Served: BROOKFIELD

Other	Compl	iance	Sched	lules	

Compliance Schedule Activity

CROSS CONNECTION SURVEY REPORT

3/1/2020

CNO33 CO	MINECTION SORVET KEI	- OK1	3/ 1	/2020				
		<b>Water System Facili</b>	ity and Sampling Po	oint Ir	nventoi	у		
Water System Facility ID	Water System Facility	Sampling Point	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION	4	DISTRIBUTION	Α				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		PHOTRB1001	LOBBY LAVATORY	Α		N	Υ	
		PHOTRB1002	KITCHEN	Α	Υ	N		
		PHOTRB1003	1ST FLOOR MENS ROOM	Α	Υ	N		
		PHOTRB1004	1ST FLOOR MENS ROOM	Α	Υ	N		
		PHOTRB1005	1ST FLOOR LADIES ROO	Α	Υ	N		
		PHOTRB1006	1ST FLOOR LADIES ROO	Α	Υ	N		
		PHOTRB1007	1ST FLOOR JANITOR CL	Α	Υ	N		
		PHOTRB1008	2ND FLOOR MENS ROOM	Α	Υ	N		
		PHOTRB1009	2ND FLOOR MENS ROOM	Α	Υ	N		
		PHOTRB1010	2ND FLOOR LADIES ROO	Α	Υ	N		
		PHOTRB1011	2ND FLOOR LADIES ROO	Α	Υ	N		
		PHOTRB1012	CONFERENCE ROOM SINK	. A	Υ	N		
		PHOTRB1013	2ND FLOOR MENS ROOM	Α	Υ	N		
		PHOTRB1014	2ND FLOOR MENS ROOM	Α	Υ	N		
		PHOTRB1015	2ND FLOOR LADIES ROO	Α	Υ	N		
		PHOTRB1016	2ND FLOOR LADIES ROO	Α	Υ	N		
		PHOTRB1017	2ND FLOOR JANITOR CL	Α	Υ	N		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				

60836 ATMOSPHERIC STORAGE TANK

57906

WELL

## **Certified Operator Information**

Α

WELL

2

Water System Facility: DISTRIBUTION (WSF ID: 00600)

Facility Classification: SMALL WA	ATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020

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Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name		Classification		Population	Owner Type	Primary Source					
СТ0189973	PHOTRONICS, INC. BUILDING 1	PHOTRONICS, INC. BUILDING 1						GW				
Local Address	(where applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural				
15 SECOR ROA	D	Connections			1							

Connecticut Department of Public Health Drinking Water Section

Towns Served: BROOKFIELD

				<b>Contact Inf</b>	ormation					
Name				Organization	1			Job Title		
Ms. Richelle E. Burr	•		Photronics, I	nc		Vice Presibe	nt			
Mailing Address Lin	e One		Mailing A	ddress Line Two			City	State	Zip Code	
15 Secor Road						Brookfie	ld	СТ	06804	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
203-740-5285	5285	203-775-	5601		203-482-1323	rburr@photronics.com				
Contact Role(s): Le	gal Contact									
Name				Organization	1		Job Title			
Mr. John Gedney				Photronics In	nc					
Mailing Address Lin	e One		Mailing A	ddress Line Two		City		State	Zip Code	
15 Secor Road						Brookfie	ld	СТ	06804	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ac	ldress			
203-740-5346					203-948-9526	jgedney	@photronics	.com		
Contact Role(s): Ac	dministrative	Contact, Ow	ner		•	1				

#### Please note the following:

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name Cla						Population	Owner Type	Primary Source
CT0189983	PHOTRONICS, INC. BUILDING 2		NTNC	110	Р	GW		
Local Address (\	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural	
15 SECOR ROAD		Connections			1			

Towns Served: BROOKFIELD			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION (WSF ID: 00600)			
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19	1/1-12/31	Waiver
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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	(	Connecticut Dep					U				
			ality Monit	oring ai	na Com						
PWS ID		PWS Name				Classific					Primary Source
CT018998		PHOTRONICS, INC. BUILD	ING 2	T		NTN	_	110		Р	GW
		here applicable)		Service	Resident	tial Cor	nmercia	I Ind	lustrial	Combine	d Agricultural
15 SECOR				Connection	15		1				
Towns Sei	rved: BI	ROOKFIELD	Monit	oring Dog	uiromo	nto					
Water Sv	ıstem F	Facility: ENTRY POINT		oring Req	luireme	nis					
		cals (VOCS)	(1031 10.00700)						1 routi	ne (RT) ne	r three years
_		oint (Sampling Point ID)			Monitorii	na Perin	d Co		n Perio		liance Status
Jami	pinigre	mic (sumpling rome is)			1/1/20 - :			1100010	, rene	ou comp	marice Status
			Other C	omplianc	e Sched	lules					
Complian	ce Sche	dule Activity			L	Due Dat	e	-	Achieve	ed Date	
CROSS CO	ONNECT	ION EXEMPTION			3	3/1/202	4				
		Water	System Facili	ity and Sa	ampling	Point	Inver	ntory	У		
Water							То	tal I	Lead ai	nd	
System		System Facility	Sampling Point				Colif		Coppe		Stage
Facility ID			ID	Description		Stat	.43	ıle	Rule Ti	er Asbesto	s WQP 2 DBPR
00600	DISTR	IBUTION	4	DISTRIBUTION		Α					
			DOWNSTREAM								
			PHOTRB2001	LOBBY LAVA		Α		<b>Y</b>	N		
			PHOTRB2002	KITCHENET		Α		<b>Y</b>	N		
			PHOTRB2003	1ST FLOOR				<b>′</b>	N		
			PHOTRB2004	1ST FLOOR				<b>′</b>	N		
			PHOTRB2005	1ST FLOOR	MENS ROO	M A		<b>′</b>	N	Y	
			PHOTRB2006	1ST FLOOR	MENS ROO	M A	'	<b>Y</b>	N	Υ	
			PHOTRB2007	CUSTODIAN	CLOSET	Α	•	<b>′</b>	Ν		
			PHOTRB2008	2ND FLOOR	LADIES RO	O A		<b>′</b>	Ν		
			PHOTRB2009	2ND FLOOR	LADIES RO	O A	•	<b>′</b>	Ν		
			PHOTRB2010	2ND FLOOR	MENS ROC	OM A		<b>′</b>	Ν		
			PHOTRB2011	2ND FLOOR	MENS ROC	OM A		<b>′</b>	Ν		
			UPSTREAM	WITHIN 5 SI	ERVICE CON	N A	ı				
00700	ENTRY	POINT	3	ENTRY POIN	JT	Α	ı				
57935	WELL		2	WELL		А					
			Certified		r Inform	ation					
		acility: DISTRIBUTION	•	)							
_	-	tion: SMALL WATER SYST									Certification
Operator			Operator Typ		Certificatio						Expiration
BLACK, RO	ON W.		CHIEF OPERATO		WATER TRE			_	_		6/30/2020
				l	DISTRIBUTION	ON SYST	EM OPE	RATO	R - CLA	SS II	6/30/2020
GIORDAN	IO, DAV	ID S.	ASSIGNED OPE	RATOR	WATER TRE	ATMEN	T PLANT	OPER	RATOR -	CLASS I	6/30/2020
					DISTRIBUTION	ON SYST	EM OPE	RATO	R - CLA	SS II	6/30/2020
			Con	tact Info	rmation						
Name			0	rganization						Joh Title	

15 Secor Road

Rrookfield

CT

06804

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements.

Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Job Title

State

Zip Code

Vice Presibent

City

Organization

Mailing Address Line Two

Photronics, Inc

Ms. Richelle E. Burr

Mailing Address Line One

(	Connectic	ut Depa	rtme	nt of	Public	Health	Drin	nking	ξ W	/ater	Section	on	
	Wat	ter Qua	lity M	Ionito	oring a	nd Con	nplia	nce S	Sch	nedul	e		
PWS ID	PWS Name						Classif	ication	Pop	ulation	Owner T	/pe P	rimary Source
CT0189983	PHOTRONICS, IN	IC. BUILDING	<b>3</b> 2				NT	NC		110	Р		GW
Local Address (wh	nere applicable)				Service	Residen	dential Commercial Industrial Combined A				Agricultural		
15 SECOR ROAD					Connection	ns		1					
Towns Served: BR	ROOKFIELD						,	ואטטום	ıcıa			1	0000-
Business Phone	Extension	Fax		Mobile	e Phone	Emergency	Phone	E Email Address					
203-740-5285	5285	203-775-	5601			203-482-	1323	rburr@	pho	otronics.	com		
Contact Role(s):	Legal Contact		,										
Name				Org	ganization						Job	Title	
Mr. John Gedney	,			Pho	otronics Inc	•							
Mailing Address L	ine One		Mailing	Address	Line Two					City	Sta	ate	Zip Code
15 Secor Road						Brookf	ield		C	Т	06804		
Business Phone	Extension	Fax		Mobile	e Phone	Emergency	Phone	Email Address					
203-740-5346						203-948-	9526	jgedne	y@p	ohotroni	cs.com		
Contact Role(s):	Administrative	Contact. Ow	ner										

Contact Role(s): Administrative Contact, Owner

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner	уре	Primary Source
CT0189993	31 OLD ROUTE SEVEN				NTNC	50	Р		GW
Local Address (where applicable)		Service	Residen	ntial	Commerci	al Industr	al Con	nbine	d Agricultural
31 OLD ROUTE 7		Connections		1					

Towns Served: BROOKFIELD	_		
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		

Water System Facility and Sampling Point Inventory

Water
System Water System Facility
Sampling Point Sampling Point Coliform Copper Stage

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Schedule Generation Date: 4/11/2019

	Co	nnectic	ıt Depa	rtment of	Public F	lealth	Drir	king	g W	ater	Sec	ction		
				lity Monit				•	_					
PWS ID	PW	/S Name					Classif	cation	Popu	ulation	Own	er Type	Prir	nary Source
СТ0189993	31	OLD ROUTE S	EVEN				NT	NC		50		Р		GW
Local Addre	ss (whe	re applicable)			Service	Residen	tial Co	mmerc	ial I	ndustri	al (	Combine	ed .	Agricultural
31 OLD ROUTE 7					Connections			1						
Towns Serve	ed: BRO	OKFIELD			-	1					1			
Facility ID				ID	Description		Sta	tus F	Rule	Rule	Tier	Asbesto	s N	/QP 2 DBPR
00600	DISTRIBL	JTION SYSTEM		4	DISTRIBUTIO	N SYSTEM	1 /	4	Υ					
				DOWNSTREAM	WITHIN 5 SE	RVICE CO	N A	A						
				UPSTREAM	WITHIN 5 SE	RVICE CO	N A	4						
00700 E	NTRY P	TNIC		3	ENTRY POIN	Ţ	A	١						
61240 V	VELL #1			2	WELL #1		A	4						
				Con	tact Infor	mation	1							
Name Organization										Job Title	9			
Ms. Andrea Scalzo Scalzo Property Management					nent									
Mailing Address Line One Mailing Address						C	ity		State	7	Zip Code			
2 Stony Hill Rd Suite 201						Bethel				СТ		06801		
Business F	hone	Extension	Fax	Mobi	le Phone E	mergency	/ Phone	Email	Addre	ess				
203-790-6888 691 203-790-9390						203-790	-6888	ascalzo@scalzoproperty.com						

Contact Role(s): Administrative Contact, Legal Contact

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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End of schedule